



Audits – Bay & Central Region
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October 20, 2009

Donna Wigand, LCSW
Director
Contra Costa County Mental Health
1340 Arnold Drive, Suite 200
Martinez, CA 94553

Dear Ms. Wigand:

AUDIT REPORT – CONTRA COSTA COUNTY MENTAL HEALTH SERVICES

We have examined the Short-Doyle/Medi-Cal Cost Reporting and Data Collection (CR/DC) report of Contra Costa County Mental Health Services for the fiscal period July 1, 2004 to June 30, 2005. Our examination was made in accordance with Section 14170 of the Welfare and Institutions Code and included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

In our opinion, the amount shown in the accompanying Summary of Net Federal Share of Federal Short-Doyle/Medi-Cal Program Costs and EPSDT SGF (Schedule 1) represents the actual net program costs allowable under the above-mentioned statutes.

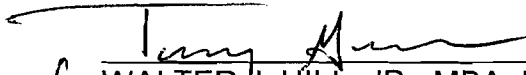
The effect of this revised allowable program costs is as follows:

	<u>Net Program Costs</u>		
	<u>Settled</u>	<u>Allowed</u>	<u>Adjustment</u>
Federal Share of Short-Doyle/Medi-Cal	\$27,563,586	\$26,751,907	\$ (811,679)
Federal Share of Healthy Families	\$ 252,209	\$ 214,036	\$ (38,173)
State General Funds EPSDT Due State	\$ 9,847,597	\$ 9,652,355	\$ (195,243)

Donna Wigand, LCSW, Director
October 20, 2009
Page 2

If you disagree with any of the results of this audit you may request an informal appeal conference. This request must be in writing and received by the Department of Health Services within sixty (60) calendar days following the date of receipt of this report. Your notice of disagreement should be directed to John Melton, Acting Chief, Administrative Appeals, Office of Legal Services, Department of Health Services, 1029 J Street, Suite 200, Sacramento, California 95814, and be in conformance with provisions of Sections 51016 and sequence, Title 22, of the California Code of Regulations.

Sincerely,


for WALTER J. HILL, JR., MBA, EA
Chief of Audits


MABEL GILTNER, Supervisor
Audits – Bay & Central Region

Enclosures

CERTIFIED MAIL

SCHEDULE 1

CONTRA COSTA COUNTY
COMMUNITY MENTAL HEALTH SERVICES
SUMMARY OF NET REIMBURSABLE MEDI-CAL PROGRAM COSTS
FISCAL YEAR ENDED JUNE 30, 2005

		<u>As Settled</u>	<u>Audit Adjustments</u>	<u>As Audited</u>
<u>NET REIMBURSABLE MEDI-CAL PROGRAM COSTS</u>				
<u>COUNTY PROVIDERS</u>				
MEDI-CAL - FFP	(Sch. 2a)	\$ 17,766,539	\$ (465,701)	\$ 17,300,838
HEALTHY FAMILIES - FFP	(Sch. 2a)	108,864	(1,429)	107,435
TOTAL FFP - COUNTY PROVIDERS		<u>\$ 17,875,403</u>	<u>\$ (467,130)</u>	<u>\$ 17,408,273</u>
<u>CONTRACT PROVIDERS</u>				
MEDI-CAL - FFP	(Sch. 3, 3a, 3b)	\$ 9,797,047	\$ (345,978)	\$ 9,451,069
HEALTHY FAMILIES - FFP		143,345	(36,744)	106,601
TOTAL FFP - CONTRACT PROVIDERS	Adj. 111	<u>\$ 9,940,392</u>	<u>\$ (382,722)</u>	<u>\$ 9,557,670</u>
<u>TOTAL FFP - COUNTY PLUS CONTRACT PROVIDERS</u>				
MEDI-CAL - FFP		\$ 27,563,586	\$ (811,679)	\$ 26,751,907
HEALTHY FAMILIES - FFP		252,209	(38,173)	214,036
TOTAL FFP - COUNTY PLUS CONTRACT PROVIDERS		<u>\$ 27,815,795</u>	<u>\$ (849,852)</u>	<u>\$ 26,965,943</u>
<u>SUMMARY OF STATE GENERAL FUNDS</u>				
EPSDT - SGF	(Sch 4)	<u>\$ 9,847,597</u>	<u>\$ (195,243)</u>	<u>\$ 9,652,355</u>

SCHEDULE 2

**CONTRA COSTA COUNTY
COMMUNITY MENTAL HEALTH SERVICES
SUMMARY OF MEDI-CAL PROGRAM COSTS BY MODE OF SERVICE
FISCAL YEAR ENDED JUNE 30, 2005**

COUNTY OPERATED FEDERAL

		<u>As Settled</u>	<u>Audit Adjustments</u>	<u>As Audited</u>
<u>Total Medi-Cal Gross Reimbursement</u>				
1. Inpatient SD/MC and Crossover	(MH 1968, Ln 11, 11A)	\$ 7,068,001	\$ 15,445	\$ 7,083,447
2. Outpatient SD/MC and Crossover	(MH 1968, Ln 11, 11A)	20,911,717	(513,345)	20,398,372
3. Enhanced SD/MC (Children) - I/P	(MH1968, Ln 16, 16A)	0	0	0
4. Enhanced SD/MC (Children) - O/P	(MH1968, Ln 16, 16A)	267,419	(38,875)	228,544
5. Enhanced SD/MC (Refugees) - I/P	(MH1968, Ln 22)	0	0	0
6. Enhanced SD/MC (Refugees) - O/P	(MH1968, Ln 22)	0	0	0
7. Healthy Families Gross Reimbursement-I/P	(MH1968, Ln 27, 27A)	0	0	0
8. Healthy Families Gross Reimbursement-O/P	(MH1968, Ln 27, 27A)	132,209	3,140	135,349
9. Total		<u>\$ 28,379,347</u>	<u>\$ (533,635)</u>	<u>\$ 27,845,712</u>

Less: Patient & Other Payor Revenues

10. Inpatient SD/MC and Crossover	(MH 1968, Ln 28, 28A)	\$ 2,126,815	\$ 215,222	\$ 2,342,037
11. Outpatient SD/MC and Crossover	(MH 1968, Ln 28, 28A)	0	111,972	111,972
12. Enhanced SD/MC (Children)-I/P	(MH 1968, Ln 29)	0	0	0
13. Enhanced SD/MC (Children)-O/P	(MH 1968, Ln 29)	0	0	0
14. Enhanced SD/MC (Refugees) - I/P	(MH1968, Ln 30)	0	0	0
15. Enhanced SD/MC (Refugees) - O/P	(MH1968, Ln 30)	0	0	0
16. Healthy Families Patient Revenue-I/P	(MH 1968, Ln 31)	0	0	0
17. Healthy Families Patient Revenue-O/P	(MH 1968, Ln 31)	0	0	0
18. Total		<u>\$ 2,126,815</u>	<u>\$ 327,194</u>	<u>\$ 2,454,009</u>

Medi-Cal Net Reimbursement for Direct Services

19. Inpatient SD/MC (Incl Children Enhanced)	(Ln 1,3 - Ln 10,12)	\$ 4,941,186	\$ (199,777)	\$ 4,741,410
20. Outpatient SD/MC (Incl Children Enhanced)	(Ln 2,4 - Ln 11,13)	21,179,136	(664,192)	20,514,944
21. Enhanced SD/MC (Refugees)-I/P	(Ln 5 - Ln 14)	0	0	0
22. Enhanced SD/MC (Refugees)-O/P	(Ln 6 - Ln 15)	0	0	0
23. Healthy Families-I/P	(Ln 7 - Ln 16)	0	0	0
24. Healthy Families-O/P	(Ln 8 - Ln 17)	132,209	3,140	135,349
25. Total		<u>\$ 26,252,532</u>	<u>\$ (860,829)</u>	<u>\$ 25,391,703</u>

Medi-Cal MAA Reimbursement

26. Service Functions 01-09	(MH1979, Ln 11, Col. A)	\$ 166,098	\$ (974)	\$ 165,124
27. Service Functions 11-19, 31-39	(MH1979, Ln 12, Col. A)	311,612	(21,888)	289,724
28. Service Functions 21-19	(MH1979, Ln 13, Col. A)	285,003	3,059	288,062
29. Total		<u>\$ 762,713</u>	<u>\$ (19,804)</u>	<u>\$ 742,909</u>

SCHEDULE 2a

**CONTRA COSTA COUNTY
COMMUNITY MENTAL HEALTH SERVICES
SUMMARY OF MEDI-CAL PROGRAM COSTS BY MODE OF SERVICE
FISCAL YEAR ENDED JUNE 30, 2005**

COUNTY OPERATED FEDERAL

		<u>As Settled</u>	<u>Audit Adjustments</u>	<u>As Audited</u>
<u>Amount Negotiated Rates Exceed Cost</u>				
30. Inpatient SD/MC (Incl Children Enhanc)	(MH 1968, Ln 38, 38A)	\$ 0	\$ 0	\$ 0
31. Outpatient SD/MC (Incl Children Enhanc)	(MH 1968, Ln 38, 38A)	0	0	0
32. Enhanced SD/MC (Refugees)-I/P	(MH1968, Ln 39)	0	0	0
33. Enhanced SD/MC (Refugees)-O/P	(MH1968, Ln 39)	0	0	0
34. Healthy Families-I/P	(MH 1968, Ln 40, 40A)	0	0	0
35. Healthy Families-O/P	(MH 1968, Ln 40, 40A)	0	0	0
36. Total		<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 0</u>

Medi-Cal Administrative Reimbursement

37. Administrative Reimbursement Limit	(MH 1979, Ln 4)	\$ 7,457,132	\$ (89,843)	\$ 7,367,288
38. Medi-Cal Administration	(MH 1979, Ln 5)	\$ 7,034,007	\$ (298,529)	\$ 6,735,478
39. Medi-Cal Reimbursement	(Lower of Ln 37, Ln 38)	<u>\$ 7,034,007</u>	<u>\$ (298,529)</u>	<u>\$ 6,735,478</u>

Healthy Families Administrative Reimbursement

40. Healthy Families Administrative Reimbursement Limit	(MH1979, Ln 8)	\$ 35,274	\$ (5,338)	\$ 29,936
41. Healthy Families Administration	(MH1979, Ln 9)	\$ 41,821	\$ (10,541)	\$ 31,280
42. Healthy Families Administrative Reimbursement	(Lower of Ln 40, Ln 41)	<u>\$ 35,274</u>	<u>\$ (5,338)</u>	<u>\$ 29,936</u>

Utilization Review Reimbursement

43. Skilled Professional	(MH1979, Ln 14, Col. D)	\$ 137,844	\$ 567,589	\$ 705,433
44. Other Medi-Cal U.R.	(MH1979, Ln 15, Col. D)	<u>\$ 1,186,542</u>	<u>\$ (590,351)</u>	<u>\$ 596,191</u>

Net SD/MC Reimbursement - FFP

45. Direct Services	(MH1979, Ln 16,16A)	\$ 12,926,452	\$ (412,547)	\$ 12,513,905
46. Enhanced (Children)	(MH1979, Ln 17,17A)	173,823	(25,269)	148,554
47. Enhanced (Refugees)	(MH1979, Ln 18)	0	0	0
48. MAA	(MH 1979, Ln 11, 12 & 13)	452,607	(9,137)	443,470
49. Administrative Reimbursement	(MH1979, Ln 6)	3,517,004	(149,265)	3,367,739
50. U.R. Skilled Professional	(MH1979, Ln 14)	103,383	425,691	529,075
51. U.R. Other	(MH1979, Ln 15)	593,271	(295,175)	298,096
52. Negotiated Rate-Payback	(MH1979, Ln 20)	0	0	0
53. Subtotal- FFP		<u>\$ 17,766,539</u>	<u>\$ (465,701)</u>	<u>\$ 17,300,838</u>

54. Contract Limitation Adjustment	(MH 1979, Ln 22)	\$ 0	\$ 0	\$ 0
55. Quality Assurance Review Results	(Adj #)	0	0	0

56. Total SD/MC Reimbursement - FFP		<u>\$ 17,766,539</u>	<u>\$ (465,701)</u>	<u>\$ 17,300,838</u>
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Net Healthy Families Reimbursement - FFP

57. Healthy Families Net Reimbursement	(MH1979, Ln 24,24A)	\$ 85,936	\$ 2,041	\$ 87,977
58. Negotiated Rate Exceed Costs	(MH1979, Ln 26)	0	0	0
59. Administrative Reimbursement	(MH1979, Ln 10)	22,928	(3,470)	19,458
60. Total Healthy Families Reimbursement - FFP		<u>\$ 108,864</u>	<u>\$ (1,429)</u>	<u>\$ 107,435</u>

61. Total - FFP (Ln 56 + Ln 60)		<u>\$ 17,875,403</u>	<u>\$ (467,130)</u>	<u>\$ 17,408,273</u>
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(To Sch. 1)

CONTRA COSTA COUNTY
SUMMARY OF CONTRACT PROVIDERS' MEDICAL COST
FISCAL PERIOD ENDED JUNE 30, 2005

Legal Entity Number	Legal Entity	(1) Medi-Cal and Crossover Gross Reimb.	(2) Enhanced - Children Gross Reimb.	(3) Enhanced - Refugees Gross Reimb.	(4) Total Gross Cost (Excl. HFP)	(5) Healthy Families Gross Reimb.	(6) Medi-Cal and Crossover Gross Reimb.	(7) Enhanced - Children Gross Reimb.	(8) Enhanced - Refugees Gross Reimb.	(9) Total Gross Cost (Excl. HFP)	(10) Healthy Families Gross Reimb.
		(MH 1968, Ln 5, 5A, 10,10A)	(MH 1968, Ln 16, 16A)	(MH 1968, Ln 22)	(Col. 1 to 3)	(MH 1968, Ln 27, 27A)	(MH 1968, Ln 5, 5A, 10,10A)	(MH 1968, Ln 16, 16A)	(MH 1968, Ln 22)	(Col. 6 to 8)	(MH 1968, Ln 27, 27A)
		P A T I E N T					O U T P A T I E N T				
00F07	Fee-For-Service	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	1,175,656	\$ 1,840	\$ 0	1,177,496	\$ 2,040
00106	LA Cheim School, Inc	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	1,139,717	\$ 0	\$ 0	1,139,717	\$ 0
00108	TeleCare Corporation	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	0	\$ 0	\$ 0	0	\$ 0
00109	Asian Community Mental Board	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	0	\$ 0	\$ 0	0	\$ 0
00112	Lincoln Child Center	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	1,150,186	\$ 4,657	\$ 0	1,154,843	\$ 13,828
00113	Fred Finch Youth Center	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	669,841	\$ 10,778	\$ 0	680,619	\$ 17,778
00115	Seneca Center	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	3,310,277	\$ 36,283	\$ 0	3,346,560	\$ 30,972
00119	Contra Cost Assoc. of Retard	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	732,226	\$ 803	\$ 0	733,029	\$ 3,500
00120	Families First Inc.	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	552,563	\$ 0	\$ 0	552,563	\$ 4,146
00121	We Care Society, Inc	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	877,981	\$ 0	\$ 0	877,981	\$ 40,750
00122	YMCA of The East Bay, Inc	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	268,519	\$ 0	\$ 0	268,519	\$ 5,796
00123	Desarrollo Families, Inc	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	171,678	\$ 0	\$ 0	171,678	\$ 2,551
00124	Early Childhood MH Program	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	1,194,417	\$ 16,275	\$ 0	1,210,692	\$ 20,126
00125	Phoenix Programs, Inc.	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	1,551,919	\$ 0	\$ 0	1,551,919	\$ 0
00272	Canyon Menor Residential Treatn	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	0	\$ 0	\$ 0	0	\$ 0
00273	Edgewood Center for Children	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	138,918	\$ 0	\$ 0	138,918	\$ 0
00375	Schuman Lifes Clinic	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	28,980	\$ 0	\$ 0	28,980	\$ 0
00386	Mihous Children's Services	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	1,645	\$ 0	\$ 0	1,645	\$ 0
00444	Rubicon Programs, Inc.	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	1,162,720	\$ 0	\$ 0	1,162,720	\$ 0
00445	Mental Health Consumer Concerr	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	0	\$ 0	\$ 0	0	\$ 0
00457	Sunny Hills Children's Garden	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	43,411	\$ 0	\$ 0	43,411	\$ 0
00458	Family Service Agency of Marin	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	2,315	\$ 0	\$ 0	2,315	\$ 0
00461	Summit View	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	40,044	\$ 0	\$ 0	40,044	\$ 0
00467	Moss Reach Homes, Inc	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	145,768	\$ 0	\$ 0	145,768	\$ 0
00520	Youth & Family Services	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	21,684	\$ 0	\$ 0	21,684	\$ 0
00534	Asian Pacific Psychological Servi	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	367,565	\$ 0	\$ 0	367,565	\$ 3,029
00536	Thunder Road	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	325,620	\$ 0	\$ 0	325,620	\$ 0
00541	Charis Youth Center	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	51,503	\$ 0	\$ 0	51,503	\$ 0
00551	S.T.A.R.S.	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	393,965	\$ 0	\$ 0	393,965	\$ 0
00620	Child Therapy Inst of Marin	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	23,401	\$ 0	\$ 0	23,401	\$ 0
00639	Rape Crisis Center	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	234,601	\$ 3,334	\$ 0	237,935	\$ 3,674
00641	West Coast Children's Center	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	239,613	\$ 0	\$ 0	239,613	\$ 134
00642	Family Stress Center	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	578,795	\$ 4,155	\$ 0	582,950	\$ 10,385
00643	Jewish Family & Children's Svs	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	67,339	\$ 423	\$ 0	67,762	\$ 0
00644	Catholic Charities of The East	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	4,174	\$ 0	\$ 0	4,174	\$ 0
00645	Battered Women's Alternative	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	28,211	\$ 0	\$ 0	28,211	\$ 0
00667	The Family Institute of Pinole	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	222,123	\$ 0	\$ 0	222,123	\$ 0
00670	Touchstone Counseling Service	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	95,866	\$ 0	\$ 0	95,866	\$ 0
00700	Porti Bell Hume Behavioral HI	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	66,847	\$ 0	\$ 0	66,847	\$ 0
00707	Pine Tree Gardens	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	39,930	\$ 0	\$ 0	39,930	\$ 0
00710	California Psychiatric Trasitions	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	0	\$ 0	\$ 0	0	\$ 0
00750	Bay Area Psychotherapy Service	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	197,239	\$ 0	\$ 0	197,239	\$ 1,023
00758	Family Service of San Leandro	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	3,350	\$ 0	\$ 0	3,350	\$ 0
00759	Family Services of Tri-Cities	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	3,261	\$ 314	\$ 0	3,575	\$ 0
00765	A Better Way	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	2,460	\$ 0	\$ 0	2,460	\$ 0
00770	Psychotherapy Institute of Ind. Fa	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	32,859	\$ 0	\$ 0	32,859	\$ 0
00773	Bay Area Community Resources	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	427,866	\$ 0	\$ 0	427,866	\$ 979
00835	New Connections	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	124,112	\$ 0	\$ 0	124,112	\$ 1,247

CONTRA COSTA COUNTY
SUMMARY OF CONTRACT PROVIDERS' MEDI-CAL COST
FISCAL PERIOD ENDED JUNE 30, 2005

Legal Entity Number	Legal Entity	(1) Medi-Cal and Crossover Gross Reimb.	(2) Enhanced - Children Gross Reimb.	(3) Enhanced - Refugees Gross Reimb.	(4) Total Gross Cost (Excl. HFP)	(5) Healthy Families Gross Reimb.	(6) Medi-Cal and Crossover Gross Reimb.	(7) Enhanced - Children Gross Reimb.	(8) Enhanced - Refugees Gross Reimb.	(9) Total Gross Cost (Excl. HFP)	(10) Healthy Families Gross Reimb.
		(MH 1968, Ln 5, 5A, 10, 10A)	(MH 1968, Ln 16, 16A)	(MH 1968, Ln 22)	(Col. 1 to 3)	(MH 1968, Ln 27, 27A)	(MH 1968, Ln 5, 5A, 10, 10A)	(MH 1968, Ln 16, 16A)	(MH 1968, Ln 22)	(Col. 6 to 8)	(MH 1968, Ln 27, 27A)
		I N P A T I E N T					O U T P A T I E N T				
00857	Hiawatha Harris, Inc	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 3,651	\$ 0	\$ 0	\$ 3,651	\$ 0
00859	Family and Child Counseling Cen	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 13,171	\$ 0	\$ 0	\$ 13,171	\$ 0
00949	Crestwood Behavioral Health	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
01032	YWCA of Contra Costa	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 97,728	\$ 0	\$ 0	\$ 97,728	\$ 0
01060	Youth Services Bureau	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 505,224	\$ 0	\$ 0	\$ 505,224	\$ 0
01067	North Berkeley	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 5,854	\$ 0	\$ 0	\$ 5,854	\$ 0
01074	New Directions Counseling Cnt	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 5,567	\$ 0	\$ 0	\$ 5,567	\$ 0
01089	Youth Homes, Inc	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 523,519	\$ 719	\$ 0	\$ 524,238	\$ 0
01109	Mt. Diablo USD WrapAround & C	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 118,169	\$ 0	\$ 0	\$ 118,169	\$ 0
01131	Rubino Counseling Services	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 17,150	\$ 162	\$ 0	\$ 17,312	\$ 162
01139	Bay Area Psychotherapy Service	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 40,168	\$ 0	\$ 0	\$ 40,168	\$ 1,887
01143	Discovery Counseling Center	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 26,967	\$ 0	\$ 0	\$ 26,967	\$ 0
01157	The Lucas Center	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 56,942	\$ 0	\$ 0	\$ 56,942	\$ 0
01165	Carrie McClier	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 42,477	\$ 844	\$ 0	\$ 43,321	\$ 0
01182	West Contra Costa USD	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 51,711	\$ 0	\$ 0	\$ 51,711	\$ 0
01236	Amador Institute	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 5,527	\$ 0	\$ 0	\$ 5,527	\$ 0
GRAND TOTAL		\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 19,424,990	\$ 80,587	\$ 0	\$ 19,505,577	\$ 164,007

CONTRA COSTA COUNTY
SUMMARY OF CONTRACT PROVIDERS' MEDICAL COST
FISCAL PERIOD ENDED JUNE 30, 2005

Legal Entity Number	Legal Entity	(11) Total Revenue (Excl. HFP)	(12) Healthy Families Revenue	(13) Total Revenue (Excl. HFP)	(14) Healthy Families Revenue	(15) Total Net Cost (Excl. HFP)	(16) Net Cost Healthy Families	(17) Total Net Cost (Excl. HFP)	(18) Net Cost Healthy Families	(19) Total MAA FFP Reimbursement
		INPATIENT (MH 1968, Ln 28 to 30)	(MH 1968, Ln 31)	OUTPATIENT (MH 1968, Ln 28 to 30)	(MH 1968, Ln 31)	INPATIENT (Col 4-11)	(Col 5-12)	OUTPATIENT (Col 9-13)	(Col 10-14)	(MH 1979, Ln 11-13)
00F07	Fee-For-Service	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 1,177,496	\$ 2,040	\$ 0
00106	LA Cheim School, Inc	\$ 0	\$ 0	\$ 1,894	\$ 0	\$ 0	\$ 0	\$ 1,137,823	\$ 0	\$ 0
00108	TeleCare Corporation	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
00109	Asian Community Mental Board	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
00112	Lincoln Child Center	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 1,154,843	\$ 13,828	\$ 0
00113	Fred Finch Youth Center	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 680,619	\$ 17,778	\$ 0
00115	Seneca Center	\$ 0	\$ 0	\$ 964	\$ 0	\$ 0	\$ 0	\$ 3,345,596	\$ 30,972	\$ 0
00119	Contra Cost Assoc. of Retard	\$ 0	\$ 0	\$ 426	\$ 0	\$ 0	\$ 0	\$ 732,603	\$ 3,500	\$ 0
00120	Families First Inc.	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 552,563	\$ 4,146	\$ 0
00121	We Care Society, Inc	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 877,981	\$ 40,750	\$ 0
00122	YMCA of The East Bay, Inc	\$ 0	\$ 0	\$ 46	\$ 0	\$ 0	\$ 0	\$ 268,473	\$ 5,796	\$ 0
00123	Desarrollo Families, Inc	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 171,678	\$ 2,551	\$ 0
00124	Early Childhood MH Program	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 1,210,692	\$ 20,126	\$ 0
00125	Phoenix Programs, Inc.	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 1,551,919	\$ 0	\$ 0
00272	Canyon Manor Residential Treatr	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
00273	Edgewood Center for Children	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 138,918	\$ 0	\$ 0
00375	Schuman Lifes Clinic	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 28,980	\$ 0	\$ 0
00386	Mihous Children's Services	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 1,645	\$ 0	\$ 0
00444	Rubicon Programs, Inc.	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 1,162,720	\$ 0	\$ 0
00445	Mental Health Consumer Concern	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
00457	Sunny Hills Children's Garden	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 43,411	\$ 0	\$ 0
00458	Family Service Agency of Marin	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 2,315	\$ 0	\$ 0
00461	Summit View	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 40,044	\$ 0	\$ 0
00467	Moss Reach Homes, Inc	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 145,768	\$ 0	\$ 0
00520	Youth & Family Services	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 21,684	\$ 0	\$ 0
00534	Asian Pacific Psychological Serv	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 367,565	\$ 3,029	\$ 0
00536	Thunder Road	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 325,620	\$ 0	\$ 0
00541	Charis Youth Center	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 51,503	\$ 0	\$ 0
00551	S.T.A.R.S.	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 393,965	\$ 0	\$ 0
00620	Child Therapy Inst of Marin	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 23,401	\$ 0	\$ 0
00639	Rape Crisis Center	\$ 0	\$ 0	\$ 887	\$ 0	\$ 0	\$ 0	\$ 237,048	\$ 3,674	\$ 0
00641	West Coast Children's Center	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 239,613	\$ 134	\$ 0
00642	Family Stress Center	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 582,950	\$ 10,385	\$ 0
00643	Jewish Family & Children's Svs	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 67,762	\$ 0	\$ 0
00644	Catholic Charities of The East	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 4,174	\$ 0	\$ 0
00645	Battered Women's Alternative	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 28,211	\$ 0	\$ 0
00667	The Family Institute of Pinole	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 222,123	\$ 0	\$ 0
00670	Touchstone Counseling Service	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 95,866	\$ 0	\$ 0
00700	Porti Bell Hume Behavioral HI	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 66,847	\$ 0	\$ 0
00707	Pine Tree Gardens	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 39,930	\$ 0	\$ 0
00710	California Psychiatric Trisitions	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
00750	Bay Area Psychotherapy Service	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 197,239	\$ 1,023	\$ 0
00758	Family Service of San Leandro	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 3,350	\$ 0	\$ 0
00759	Family Services of Tri-Cities	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 3,575	\$ 0	\$ 0
00765	A Better Way	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 2,460	\$ 0	\$ 0
00770	Psychotherapy Institute of Ind. Fai	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 32,859	\$ 0	\$ 0
00773	Bay Area Community Resources	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 427,866	\$ 979	\$ 0
00835	New Connections	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 124,112	\$ 1,247	\$ 0

CONTRA COSTA COUNTY
SUMMARY OF CONTRACT PROVIDERS' MEDICAL COST
FISCAL PERIOD ENDED JUNE 30, 2005

Legal Entity Number	Legal Entity	(11) Total Revenue (Excl. HFP)	(12) Healthy Families Revenue	(13) Total Revenue (Excl. HFP)	(14) Healthy Families Revenue	(15) Total Net Cost (Excl. HFP)	(16) Net Cost Healthy Families	(17) Total Net Cost (Excl. HFP)	(18) Net Cost Healthy Families	(19) Total MAA FFP
		INPATIENT (MH 1968, Ln 28 to 30)	INPATIENT (MH 1968, Ln 31)	OUTPATIENT (MH 1968, Ln 28 to 30)	OUTPATIENT (MH 1968, Ln 31)	INPATIENT (Col 4-11)	INPATIENT (Col 5-12)	OUTPATIENT (Col 9-13)	OUTPATIENT (Col 10-14)	Reimbursement (MH 1979, Ln 11-13)
00857	Hiawatha Harris, Inc	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 3,651	\$ 0	\$ 0
00869	Family and Child Counseling Cent	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 13,171	\$ 0	\$ 0
00949	Crestwood Behavioral Health	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
01032	YWCA of Contra Costa	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 97,728	\$ 0	\$ 0
01060	Youth Services Bureau	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 505,224	\$ 0	\$ 0
01067	North Berkeley	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 5,854	\$ 0	\$ 0
01074	New Directions Counseling Cnt	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 5,567	\$ 0	\$ 0
01089	Youth Homes, Inc	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 524,238	\$ 0	\$ 0
01109	Mt. Diablo USD WrapAround & Cc	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 118,169	\$ 0	\$ 0
01131	Rubino Counseling Services	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 17,312	\$ 162	\$ 0
01139	Bay Area Psychotherapy Service	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 40,168	\$ 1,887	\$ 0
01143	Discovery Counseling Center	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 26,967	\$ 0	\$ 0
01157	The Lucas Center	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 56,942	\$ 0	\$ 0
01165	Carrie McClier	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 43,321	\$ 0	\$ 0
01182	West Contra Costa USD	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 51,711	\$ 0	\$ 0
01236	Amador Institute	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 5,527	\$ 0	\$ 0
GRAND TOTAL		\$ 0	\$ 0	\$ 4,217	\$ 0	\$ 0	\$ 0	\$ 19,501,360	\$ 164,007	\$ 0

CONTRA COSTA COUNTY
SUMMARY OF CONTRACT PROVIDERS' MEDICAL COST
FISCAL PERIOD ENDED JUNE 30, 2005

Legal Entity Number	Legal Entity	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)
		Neg. Rates Exceed Costs (Excl. HFP)	Neg. Rates Exceed Costs Healthy Families	Neg. Rates Exceed Costs (Excl. HFP)	Neg. Rates Exceed Costs Healthy Families	Total SD/MC Reimbursement (FFP)	Healthy Families Reimbursement (FFP)	Total Reimbursement (FFP)	FFP Contract Maximum	Lower of FFP or Contract Maximum
		I N P A T I E N T		O U T P A T I E N T						
		(MH 1968, Ln 38 to 39)	(MH 1968, Ln 40, 40A)	(MH 1968, Ln 38 to 39)	(MH 1968, Ln 40, 40A)	(MH 1979, Line 21)	(MH 1979, Ln. 27)	(Col. 24 + 25)		
00F07	Fee-For-Service	\$ 0	\$ 0	\$ 0	\$ 0	589,024	1,326	590,350	606,056	590,350
00106	LA Cheim School, Inc	\$ 0	\$ 0	\$ 0	\$ 0	568,911	0	568,911	615,265	568,911
00108	TeleCare Corporation	\$ 0	\$ 0	\$ 0	\$ 0	0	0	0	397,614	0
00109	Asian Community Mental Board	\$ 0	\$ 0	\$ 0	\$ 0	0	0	0	61,250	0
00112	Lincoln Child Center	\$ 0	\$ 0	\$ 0	\$ 0	578,120	8,988	587,108	886,430	587,108
00113	Fred Finch Youth Center	\$ 0	\$ 0	\$ 0	\$ 0	341,925	11,555	353,480	781,276	353,480
00115	Seneca Center	\$ 0	\$ 0	\$ 0	\$ 0	1,678,240	20,132	1,698,372	1,717,931	1,698,372
00119	Contra Cost Assoc. of Retard	\$ 0	\$ 0	\$ 0	\$ 0	366,422	2,275	368,697	412,428	368,697
00120	Families First Inc.	\$ 0	\$ 0	\$ 0	\$ 0	276,282	2,695	278,977	503,667	278,977
00121	We Care Society, Inc	\$ 0	\$ 0	\$ 0	\$ 0	438,991	26,487	465,478	570,966	465,478
00122	YMCA of The East Bay, Inc	\$ 0	\$ 0	\$ 0	\$ 0	134,236	3,767	138,003	143,759	138,003
00123	Desarrollo Families, Inc	\$ 0	\$ 0	\$ 0	\$ 0	85,839	1,658	87,497	186,217	87,497
00124	Early Childhood MH Program	\$ 0	\$ 0	\$ 0	\$ 0	607,787	13,082	620,869	660,449	620,869
00125	Phoenix Programs, Inc.	\$ 0	\$ 0	\$ 0	\$ 0	775,960	0	775,960	1,288,145	775,960
00272	Canyon Manor Residential Treatr	\$ 0	\$ 0	\$ 0	\$ 0	0	0	0	51,734	0
00273	Edgewood Center for Children	\$ 0	\$ 0	\$ 0	\$ 0	69,459	0	69,459	191,412	69,459
00375	Schuman Lifes Clinic	\$ 0	\$ 0	\$ 0	\$ 0	14,490	0	14,490	14,490	14,490
00386	Mihous Children's Services	\$ 0	\$ 0	\$ 0	\$ 0	822	0	822	61,941	822
00444	Rubicon Programs, Inc.	\$ 0	\$ 0	\$ 0	\$ 0	581,360	0	581,360	684,660	581,360
00445	Mental Health Consumer Concern	\$ 0	\$ 0	\$ 0	\$ 0	0	0	0	311,773	0
00457	Sunny Hills Children's Garden	\$ 0	\$ 0	\$ 0	\$ 0	21,706	0	21,706	42,458	21,706
00458	Family Service Agency of Marin	\$ 0	\$ 0	\$ 0	\$ 0	1,158	0	1,158	1,158	1,158
00461	Summit View	\$ 0	\$ 0	\$ 0	\$ 0	20,022	0	20,022	22,632	20,022
00467	Moss Reach Homes, Inc	\$ 0	\$ 0	\$ 0	\$ 0	72,884	0	72,884	50,000	50,000
00520	Youth & Family Services	\$ 0	\$ 0	\$ 0	\$ 0	10,842	0	10,842	11,741	10,842
00534	Asian Pacific Psychological Servic	\$ 0	\$ 0	\$ 0	\$ 0	183,783	1,969	185,752	190,434	185,752
00536	Thunder Road	\$ 0	\$ 0	\$ 0	\$ 0	162,810	0	162,810	180,036	162,810
00541	Charis Youth Center	\$ 0	\$ 0	\$ 0	\$ 0	25,751	0	25,751	45,040	25,751
00551	S.T.A.R.S.	\$ 0	\$ 0	\$ 0	\$ 0	196,983	0	196,983	187,500	187,500
00620	Child Therapy Inst of Marin	\$ 0	\$ 0	\$ 0	\$ 0	11,700	0	11,700	14,990	11,700
00639	Rape Crisis Center	\$ 0	\$ 0	\$ 0	\$ 0	119,024	2,388	121,412	158,256	121,412
00641	West Coast Children's Center	\$ 0	\$ 0	\$ 0	\$ 0	119,806	87	119,893	25,000	25,000
00642	Family Stress Center	\$ 0	\$ 0	\$ 0	\$ 0	292,098	6,750	298,848	453,949	298,848
00643	Jewish Family & Children's Svs	\$ 0	\$ 0	\$ 0	\$ 0	33,944	0	33,944	50,000	33,944
00644	Catholic Charities of The East	\$ 0	\$ 0	\$ 0	\$ 0	2,087	0	2,087	2,087	2,087
00645	Battered Women's Alternative	\$ 0	\$ 0	\$ 0	\$ 0	14,106	0	14,106	14,106	14,106
00667	The Family Institute of Pinole	\$ 0	\$ 0	\$ 0	\$ 0	111,062	0	111,062	25,000	25,000
00670	Touchstone Counseling Service	\$ 0	\$ 0	\$ 0	\$ 0	47,933	0	47,933	50,801	47,933
00700	Porti Bell Hume Behavioral Hi	\$ 0	\$ 0	\$ 0	\$ 0	33,424	0	33,424	25,000	25,000
00707	Pine Tree Gardens	\$ 0	\$ 0	\$ 0	\$ 0	19,965	0	19,965	21,753	19,965
00710	California Psychiatric Trasiitions	\$ 0	\$ 0	\$ 0	\$ 0	0	0	0	81,120	0
00750	Bay Area Psychotherapy Service	\$ 0	\$ 0	\$ 0	\$ 0	98,620	665	99,285	50,000	50,000
00758	Family Service of San Leandro	\$ 0	\$ 0	\$ 0	\$ 0	1,675	0	1,675	1,675	1,675
00759	Family Services of Tri-Cities	\$ 0	\$ 0	\$ 0	\$ 0	1,834	0	1,834	24,997	1,834
00765	A Better Way	\$ 0	\$ 0	\$ 0	\$ 0	1,230	0	1,230	1,624	1,230
00770	Psychotherapy Institute of Ind. Far	\$ 0	\$ 0	\$ 0	\$ 0	16,430	0	16,430	49,996	16,430
00773	Bay Area Community Resources	\$ 0	\$ 0	\$ 0	\$ 0	213,933	636	214,569	224,119	214,569
00835	New Connections	\$ 0	\$ 0	\$ 0	\$ 0	62,056	810	62,866	100,650	62,866

CONTRA COSTA COUNTY
SUMMARY OF CONTRACT PROVIDERS' MEDICAL COST
FISCAL PERIOD ENDED JUNE 30, 2005

Legal Entity		(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)
Number	Legal Entity	Neg. Rates Exceed Costs (Excl. HFP)	Neg. Rates Exceed Costs Healthy Families	Neg. Rates Exceed Costs (Excl. HFP)	Neg. Rates Exceed Costs Healthy Families	Total SD/MC Reimbursement (FFP)	Healthy Families Reimbursement (FFP)	Total Reimbursement (FFP)	FFP Contract Maximum	Lower of FFP or Contract Maximum
		I N P A T I E N T		O U T P A T I E N T						
		(MH 1968, Ln 38 to 39)	(MH 1968, Ln 40, 40A)	(MH 1968, Ln 38 to 39)	(MH 1968, Ln 40, 40A)	(MH 1979, Line 21)	(MH 1979, Ln. 27)	(Col. 24 + 25)		
00857	Hiawatha Harris, Inc	\$ 0	\$ 0	\$ 0	\$ 0	1,826	\$ 0	1,826	\$ 1,826	\$ 1,826
00869	Family and Child Counseling Cent	\$ 0	\$ 0	\$ 0	\$ 0	6,586	\$ 0	6,586	\$ 6,586	\$ 6,586
00949	Crestwood Behavioral Health	\$ 0	\$ 0	\$ 0	\$ 0	0	\$ 0	0	\$ 3,885,340	\$ 0
01032	YWCA of Contra Costa	\$ 0	\$ 0	\$ 0	\$ 0	48,864	\$ 0	48,864	\$ 50,000	\$ 48,864
01060	Youth Services Bureau	\$ 0	\$ 0	\$ 0	\$ 0	252,612	\$ 0	252,612	\$ 265,369	\$ 252,612
01067	North Berkeley	\$ 0	\$ 0	\$ 0	\$ 0	2,927	\$ 0	2,927	\$ 3,043	\$ 2,927
01074	New Directions Counseling Cnt	\$ 0	\$ 0	\$ 0	\$ 0	2,784	\$ 0	2,784	\$ 2,784	\$ 2,784
01089	Youth Homes, Inc	\$ 0	\$ 0	\$ 0	\$ 0	262,227	\$ 0	262,227	\$ 299,997	\$ 262,227
01109	Mt. Diablo USD WrapAround & Cc	\$ 0	\$ 0	\$ 0	\$ 0	59,085	\$ 0	59,085	\$ 93,984	\$ 59,085
01131	Rubino Counseling Services	\$ 0	\$ 0	\$ 0	\$ 0	8,680	105	8,785	\$ 9,020	\$ 8,785
01139	Bay Area Psychotherapy Service	\$ 0	\$ 0	\$ 0	\$ 0	20,084	1,226	21,310	\$ 24,993	\$ 21,310
01143	Discovery Counseling Center	\$ 0	\$ 0	\$ 0	\$ 0	13,484	\$ 0	13,484	\$ 16,718	\$ 13,484
01157	The Lucas Center	\$ 0	\$ 0	\$ 0	\$ 0	28,471	\$ 0	28,471	\$ 49,969	\$ 28,471
01165	Carrie McCluer	\$ 0	\$ 0	\$ 0	\$ 0	21,787	\$ 0	21,787	\$ 0	\$ 0
01182	West Contra Costa USD	\$ 0	\$ 0	\$ 0	\$ 0	25,856	\$ 0	25,856	\$ 25,000	\$ 25,000
01236	Amador Institute	\$ 0	\$ 0	\$ 0	\$ 0	2,763	\$ 0	2,763	\$ 3,652	\$ 2,763
GRAND TOTAL		\$ 0	\$ 0	\$ 0	\$ 0	9,762,770	\$ 106,801	9,869,571	\$ 16,991,854	\$ 9,575,695

SCHEDULE 4

**CONTRA COSTA COUNTY
COMMUNITY MENTAL HEALTH SERVICES
COMPUTATION OF EPSDT STATE SHARE PER AUDIT
FISCAL YEAR ENDED JUNE 30, 2005**

	<u>As Settled</u>	<u>Audit Adjustments</u>	<u>As Audited</u>
(1) SD/MC Actuals (MH 1979, Lns. 16, 16A, 17, 17A, 18) (including contractors)	\$ 40,746,893	\$ (730,589)	\$ 40,016,304
(2) Total SD/MC Claims	40,867,475	(36,054)	40,831,421
(3) Percent % (Line 1/Line 2)	99.70%	-1.70%	98.00%
(4) EPSDT Claims	25,223,169	(36,054)	25,187,115
(5) Actual Cost Settled EPSDT SD/MC (Line 3 X Line 4)	25,147,499	(464,126)	24,683,373
(6) Cost Settled Baseline for EPSDT	4,768,167	0	4,768,167
(7) Net Cost Settlement Amount (Line 5 - Line 6)	20,379,332	(464,126)	19,915,206
(8) 50% of Cost Settlement Amount (Line 7 x 50%)	10,189,666	(232,063)	9,957,603
(8a) FY 2001-02 EPSDT Settlement (48.64% of net cost (8))	6,905,120	0	6,905,120
(8b) Annual Local Growth (L. 8 - 8a)	3,284,546	(232,063)	3,052,483
(9) County Match 10% of Local Growth (8b x 10%)	328,455	(23,206)	305,248
(10) Net Cost Settlement Amount (L. 8 - 9)	9,861,211	(208,856)	9,652,355
(11) SGF Distribution (Settled and Audited)	9,861,211	(13,614)	9,847,597
(12) SGF Due State	\$ <u>0</u>	\$ <u>(195,243)</u>	\$ <u>(195,243)</u> (To Sch. 1)

Source:

- (1) Total CFRS SD/MC actuals after final Settlement (Col. 1) and Audit (Col. 3) for Net Direct Outpatient Services (includes Mode 05 - SF's 20-94, Mode 10, and Mode 15)
- (2) Total SD/MC paid claims (total non-hospital, including PHF's) by County Submitting Claims (includes contract providers, excludes Healthy Families)
- (4) SD/MC paid claims for children under 21 years of age (full scope, non-hospital, including PHF's) including new aid codes by County of Beneficiary
- (6) Cost Settled Baseline for EPSDT for FY 2004-2005, includes increase for FFS/MC provider rate increase
- (7) Settlement amount prior to 10% match calculation (8) - (9)
- (11) SGF distribution (See DMH letter dated August 30, 2004 sent to Local Mental Health Directors)

Note: This amount may include payments not yet made but scheduled to be released as soon as funding becomes available. It may also include payments made in error in FY 06, which will be reversed in FY 06 and rescheduled for payment when funding becomes available.

- (12) Amount owed back to the state cannot be more than was paid.

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
CONTRA COSTA COUNTY				00007	123	June 30, 2005	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED COSTS</u>			
1	MH 1960	4	C	OTHER ADJUSTMENTS	\$ 620,164	\$ (469,528)	\$ 150,636 *
2	MH1960	8	C	ALLOWABLE COSTS FOR ALLOCATION	\$ 68,715,787	\$ (469,528)	\$ 68,246,259 *
				To adjust A-87 COWCAP costs to agree with formally approved plan dated September 16, 2004.			
3	MH 1960	4	C	OTHER ADJUSTMENTS	** \$ 150,636	\$ (644,233)	\$ (493,597)
4	MH1960	8	C	ALLOWABLE COSTS FOR ALLOCATION	** \$ 68,246,259	\$ (644,233)	\$ 67,602,026 *
				To adjust Calworks Costs to agree with the County's records and supporting documentations.			
5	MH 1960	6	C	MEDI-CAL ADJUSTMENTS	\$ 117,750	\$ (117,750)	\$ - *
6	MH 1960	8	C	ALLOWABLE COSTS FOR ALLOCATION	** \$ 67,602,026	\$ (117,750)	\$ 67,484,276 *
				To disallow adjustment of Hospital Administrative Days Ancillary Costs to agree with the County's records and supporting documentations.			
7	MH 1960	6	C	MEDI-CAL ADJUSTMENTS	** \$ -	\$ (27,549)	\$ (27,549)
8	MH1960	8	C	ALLOWABLE COSTS FOR ALLOCATION	** \$ 67,484,276	\$ (27,549)	\$ 67,456,727
				To adjust MAA expenses to agree with the County's records and supporting documentations.			
9	MH1960	18	C	MODE COSTS (DIRECT SERVICE AND MAA)	\$ 55,237,280	\$ (789,532)	\$ 54,447,748
				To adjust reported Mode Costs in conjunction with Adj. # 3, 5, and 7 above.			
				Adj. # 3: Calworks Cost Adjustment	\$ (644,233)		
				Adj. # 5: Adjustment of Hospital Administrative Days Ancillary Cos	\$ (117,750)		
				Adj. # 7: Adjustment of MAA Costs	\$ (27,549)		
					<u>\$ (789,532)</u>		
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
CONTRA COSTA COUNTY				00007	123	June 30, 2005	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED COSTS</u>			
10	MH 1960	9	3	SD/MC ADMINISTRATION	\$ 7,034,007	\$ (7,034,007)	\$ - *
11	MH 1960	10	3	HEALTHY FAMILIES ADMINISTRATION	\$ 41,821	\$ (41,821)	\$ - *
12	MH 1960	11	3	NON SD/MC ADMINISTRATION	\$ 4,349,010	\$ (4,349,010)	\$ - *
	MH 1960	12	3	TOTAL ADMINISTRATIVE COSTS	\$ 11,424,838		\$ 11,424,838 *
				To eliminate the reported distribution of administrative costs. Costs will be redistributed after adjustments to administrative costs below.			
13	MH 1960	12	3	TOTAL ADMINISTRATIVE COSTS	** \$ 11,424,838	\$ (469,528)	\$ 10,955,310 *
				To adjust administrative costs in conjunction with adjustment Number 1.			
14	MH 1960	9	3	SD/MC ADMINISTRATION	** \$ -	\$ 6,735,478	\$ 6,735,478
15	MH 1960	10	3	HEALTHY FAMILIES ADMINISTRATION	** \$ -	\$ 31,280	\$ 31,280
16	MH 1960	11	3	NON SD/MC ADMINISTRATION	** \$ -	\$ 4,188,552	\$ 4,188,552
	MH 1960	12	3	TOTAL ADMINISTRATIVE COSTS	** \$ 10,955,310		\$ 10,955,310
				To allocate total administrative cost among SD/MC, Healthy Families, and Non SD/MC Administration based on the gross cost method percentages of 61.4814% for SD/MC, 0.2855% for Healthy Families, and 38.2331% for Non SD/MC.			
17	MH 1960	13	3	SKILLED PROFESSIONAL MEDICAL PERSONNEL	\$ 137,844	\$ 567,589	\$ 705,433
18	MH 1960	14	3	OTHER SD/MC UTILIZATION REVIEW	\$ 1,186,542	\$ (590,351)	\$ 596,191
19	MH 1960	15	3	NON SD/MC UTILIZATION REVIEW	\$ 729,283	\$ 22,763	\$ 752,046
	MH 1960	16	3	TOTAL UTILIZATION REVIEW COSTS	\$ 2,053,669		\$ 2,053,669
				To allocate the Non SD/MC Utilization Review portion related to SPMP and Other SD/MC Utilization Review using the audited gross cost percentages of 63.3804% for SD/MC and 36.6196% for Non SD/MC.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
CONTRA COSTA COUNTY				00007	123	June 30, 2005	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED MODES OF SERVICE</u>			
20	MH 1964	2	1	HOSPITAL INPATIENT SERVICES (MODE 05-SFC 10-19)	\$ 18,092,455	\$ (117,750)	\$ 17,974,705
21	MH 1964	9	1	TOTAL DIRECT SERVICES	\$ 55,237,280	\$ (117,750)	\$ 55,119,530 *
				To adjust costs at the mode level in conjunction with adjustment Number 5.			
22	MH 1964	5	1	OUTPATIENT SERVICES (MODE 15 PROGRAM 1 + PROGRAM 2)	\$ 30,349,926	\$ (644,233)	\$ 29,705,693
23	MH 1964	9	1	TOTAL DIRECT SERVICES	** \$ 55,119,530	\$ (644,233)	\$ 54,475,297 *
				To adjust costs at the mode level in conjunction with adjustment Number 3.			
24	MH 1964	7	1	MEDI-CAL ADMINISTRATIVE ACTIVITIES (MODE 55)	\$ 1,132,276	\$ (27,549)	\$ 1,104,727
25	MH 1964	9	1	TOTAL DIRECT SERVICES	** \$ 54,475,297	\$ (27,549)	\$ 54,447,748
				To adjust costs at the mode level in conjunction with adjustment Number 7.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
CONTRA COSTA COUNTY				00007	123	June 30, 2005	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED GROSS COST</u>			
26	MH 1966A	3		<u>MODE 05</u> SERVICE FUNCTION 05/10	\$ 16,028,432	(80,006)	\$ 15,948,426
27	MH 1966A	3		SERVICE FUNCTION 05/19	\$ 2,064,023	(37,744)	\$ 2,026,279
				To adjust the disallowed Hospital Administrative Days Ancillary Costs at the service function level in conjunction with adjustment Number 5.			
28	MH 1966A	3		<u>MODE 10</u> SERVICE FUNCTION 10/20	\$ 2,640,138	650,947	\$ 3,291,085
29	MH 1966A	3		SERVICE FUNCTION 10/81	\$ 497,679	(202,811)	\$ 294,868
30	MH 1966A	3		SERVICE FUNCTION 10/85	\$ 1,166,854	(448,136)	\$ 718,718
31	MH 1966A	3		<u>MODE 15</u> SERVICE FUNCTION 15/01	\$ 2,546,697	256,945	\$ 2,803,642
32	MH 1966A	3		SERVICE FUNCTION 15/10	\$ 12,979,184	(727,091)	\$ 12,252,093
33	MH 1966A	3		SERVICE FUNCTION 15/60	\$ 12,100,897	557,632	\$ 12,658,529
34	MH 1966A	3		SERVICE FUNCTION 15/70	\$ 1,937,575	(87,486)	\$ 1,850,089
				To adjust the regular Medi-Cal reported gross cost at the service function level to reflect the RVS method of allocation.			
35	MH 1966A	3		<u>MODE 15 (CAW)</u> SERVICE FUNCTION 15/10 (CAW)	\$ 785,573	(644,233)	\$ 141,340
				To adjust the Calworks program reported gross cost at the service function level in conjunction with adjustment Number 3.			
36	MH 1966A	3		<u>MODE 55 (MAA)</u> SERVICE FUNCTION 55/01	\$ 166,098	\$ (974)	\$ 165,124
37	MH 1966A	3		SERVICE FUNCTION 55/14	\$ 504,635	\$ (33,482)	\$ 471,153
38	MH 1966A	3		SERVICE FUNCTION 55/24	\$ 461,543	\$ 6,907	\$ 468,450
				To adjust the MAA reported gross cost at the service function level in conjunction with adjustment Number 7.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
CONTRA COSTA COUNTY				00007	123	June 30, 2005	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED TOTAL UNITS</u> <u>COUNTY PROVIDERS</u>			
39	MH 1966A	2		SERVICE FUNCTION 05/10	12,922	175	13,097
-	MH 1966A	2		SERVICE FUNCTION 05/19	1,664	-	1,664
-	MH 1966A	2		SERVICE FUNCTION 10/20	47,285	-	47,285
40	MH 1966A	2		SERVICE FUNCTION 10/81	2,768	11	2,779
41	MH 1966A	2		SERVICE FUNCTION 10/85	4,621	202	4,823
42	MH 1966A	2		SERVICE FUNCTION 15/01	1,227,975	109,709	1,337,684
43	MH 1966A	2		SERVICE FUNCTION 15/10	4,550,865	(15,358)	4,535,507
44	MH 1966A	2		SERVICE FUNCTION 15/60	2,295,517	19,524	2,315,041
45	MH 1966A	2		SERVICE FUNCTION 15/70	456,655	977	457,632
			Info	TOTAL	<u>8,600,272</u>	<u>115,240</u>	<u>8,715,512</u>
				To adjust the reported Total Units at the service function level for the County Providers to agree with the County's records.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
CONTRA COSTA COUNTY				00007	123	June 30, 2005	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED MEDICAL UNITS/TIME</u> <u>COUNTY PROVIDERS - PROGRAMS 1 AND 2</u>			
46	MH 1966A	8	TOTAL	MEDI-CAL UNITS 07/01/04 - 09/30/04	1,446,206	(47,043)	1,399,163 *
47	MH 1966A	8A	TOTAL	MEDI-CAL UNITS 10/01/04 - 06/30/05	4,731,266	(127,074)	4,604,192 *
48	MH 1966A	9	TOTAL	MEDICARE/MEDI-CAL CROSSOVER UNITS 07/01/04 - 09/30/04	532	3,042	3,574 *
49	MH 1966A	9A	TOTAL	MEDICARE/MEDI-CAL CROSSOVER UNITS 10/01/04 - 06/30/05	1,796	33,896	35,692 *
50	MH 1966A	10	TOTAL	ENHANCED SD/MC (CHILDREN) UNITS 07/01/04 - 09/30/04	18,921	(10,569)	8,352 *
51	MH 1966A	10A	TOTAL	ENHANCED SD/MC (CHILDREN) UNITS 10/01/04 - 06/30/05	14,128	9,357	23,485 *
-	MH 1966A	10B	TOTAL	ENHANCED SD/MC (REFUGEES) UNITS 07/01/04 - 06/30/05	0	0	0 *
52	MH 1966A	11	TOTAL	HEALTHY FAMILIES (SED) UNITS 07/01/04 - 09/30/04	19,581	(9,764)	9,817 *
53	MH 1966A	11A	TOTAL	HEALTHY FAMILIES (SED) UNITS 10/01/04 - 06/30/05	27,954	14,196	42,150 *
		Info	TOTAL		<u>6,260,384</u>	<u>(133,959)</u>	<u>6,126,425 *</u>
				<p>To adjust the as settled (MH 1966A) SD/MC units of service/time for the county operated facilities to agree with the State DMH Net Approved Claims Report dated March 4, 2009. (Net disallowed claims of 265,441 units). Copies of workpapers detailing adjustments by service functions have been provided to the County.</p>			
				<p>* Balance carried forward to subsequent adjustment. ** Balance brought forward from prior adjustment.</p>			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
CONTRA COSTA COUNTY				00007	123	June 30, 2005	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED MEDICAL UNITS/TIME</u> <u>COUNTY PROVIDERS - PROGRAMS 1 AND 2</u>			
54	MH 1966A	8	TOTAL	MEDI-CAL UNITS 07/01/04 - 09/30/04	** 1,399,163	(12,441)	1,386,722 *
55	MH 1966A	8A	TOTAL	MEDI-CAL UNITS 10/01/04 - 06/30/05	** 4,604,192	(89,584)	4,514,608 *
56	MH 1966A	9	TOTAL	MEDICARE/MEDI-CAL CROSSOVER UNITS 07/01/04 - 09/30/04	** 3,574	4,419	7,993 *
57	MH 1966A	9A	TOTAL	MEDICARE/MEDI-CAL CROSSOVER UNITS 10/01/04 - 06/30/05	** 35,692	(4,991)	30,701 *
58	MH 1966A	10	TOTAL	ENHANCED SD/MC (CHILDREN) UNITS 07/01/04 - 09/30/04	** 8,352	1,840	10,192 *
59	MH 1966A	10A	TOTAL	ENHANCED SD/MC (CHILDREN) UNITS 10/01/04 - 06/30/05	** 23,485	(210)	23,275 *
	MH 1966A	10B	TOTAL	ENHANCED SD/MC (REFUGEES) UNITS 07/01/04 - 06/30/05	** 0	0	0 *
60	MH 1966A	11	TOTAL	HEALTHY FAMILIES (SED) UNITS 07/01/04 - 09/30/04	** 9,817	431	10,248 *
61	MH 1966A	11A	TOTAL	HEALTHY FAMILIES (SED) UNITS 10/01/04 - 06/30/05	** 42,150	(997)	41,153 *
		Info	TOTAL		** <u>6,126,425</u>	<u>(101,533)</u>	<u>6,024,892</u> *
				<p>To adjust the SD/MC units of service/time per the State DMH Net Approved Claims Report to the Net county's records. (Net disallowed claims of 265,476 units). Above adjustments include Phase II.</p> <p>Copies of workpapers detailing adjustments by service functions have been provided to the County.</p>			
				<p>* Balance carried forward to subsequent adjustment.</p> <p>** Balance brought forward from prior adjustment.</p>			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended													
CONTRA COSTA COUNTY				00007	123	June 30, 2005													
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted												
Adj. No.	Form/ Sch.	Line	Col.																
				<u>ADJUSTMENTS TO REPORTED MEDICAL UNITS/TIME COUNTY PROVIDERS - PROGRAMS 1 AND 2</u>															
62	MH 1966A	8	TOTAL	MEDI-CAL UNITS 07/01/04 - 09/30/04	** 1,386,722	101	1,386,823												
63	MH 1966A	8A	TOTAL	MEDI-CAL UNITS 10/01/04 - 06/30/05	** 4,514,608	429	4,515,037												
64	MH 1966A	9	TOTAL	MEDICARE/MEDI-CAL CROSSOVER UNITS 07/01/04 - 09/30/04	** 7,993	(101)	7,892												
65	MH 1966A	9A	TOTAL	MEDICARE/MEDI-CAL CROSSOVER UNITS 10/01/04 - 06/30/05	** 30,701	(429)	30,272												
66	MH 1966A	10	TOTAL	ENHANCED SD/MC (CHILDREN) UNITS 07/01/04 - 09/30/04	** 10,192	(1,841)	8,351												
67	MH 1966A	10A	TOTAL	ENHANCED SD/MC (CHILDREN) UNITS 10/01/04 - 06/30/05	** 23,275	196	23,471												
-	MH 1966A	10B	TOTAL	ENHANCED SD/MC (REFUGEES) UNITS 07/01/04 - 06/30/05	** 0	0	0												
68	MH 1966A	11	TOTAL	HEALTHY FAMILIES (SED) UNITS 07/01/04 - 09/30/04	** 10,248	(260)	9,988												
69	MH 1966A	11A	TOTAL	HEALTHY FAMILIES (SED) UNITS 10/01/04 - 06/30/05	** 41,153	65	41,218												
		Info	TOTAL		** 6,024,892	(1,840)	6,023,052												
				To adjust SD/MC units to incorporate the controls of the lower of the County records or the State DMH Approved Claims Report. Above adjustments include Phase II. Copies of workpapers detailing adjustments by service functions have been provided to the county.															
70	MH 1966A	8	TOTAL	MEDI-CAL UNITS 07/01/04 - 09/30/04	** 1,386,823	(263)	1,386,560												
				To adjust Audited SD/MC units to incorporate the result of the SD/MC Admission Inpatient Service Review. The review was performed between February 28 to March 4, 2005 and March 7 - 9, 2005 for the period July - Sept. 2004. This decision was made by the State DMH Oversight Branch.															
				<table><tr><td><u>Provider's Name</u></td><td><u>SFC</u></td><td><u>Disallowed units</u></td></tr><tr><td>INPATIENT PSYCH - UNIT 4C (Provider # 0714)</td><td>05/10</td><td>(221)</td></tr><tr><td></td><td>05/19</td><td>(42)</td></tr><tr><td></td><td></td><td><u>(263)</u></td></tr></table>	<u>Provider's Name</u>	<u>SFC</u>	<u>Disallowed units</u>	INPATIENT PSYCH - UNIT 4C (Provider # 0714)	05/10	(221)		05/19	(42)			<u>(263)</u>			
<u>Provider's Name</u>	<u>SFC</u>	<u>Disallowed units</u>																	
INPATIENT PSYCH - UNIT 4C (Provider # 0714)	05/10	(221)																	
	05/19	(42)																	
		<u>(263)</u>																	
				* Balance carried forward to subsequent adjustment.															
				** Balance brought forward from prior adjustment.															

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
CONTRA COSTA COUNTY				00007	123	June 30, 2005	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED MEDICAL UNITS/TIME CONTRACT PROVIDERS</u>			
71	MH 1966A	8	TOTAL	MEDI-CAL UNITS 07/01/04 - 09/30/04	1,856,092	18,234	1,874,326 *
72	MH 1966A	8A	TOTAL	MEDI-CAL UNITS 10/01/04 - 06/30/05	6,628,726	200,854	6,829,580 *
73	MH 1966A	9	TOTAL	MEDICARE/MEDI-CAL CROSSOVER UNITS 07/01/04 - 09/30/04	0	4,115	4,115 *
-	MH 1966A	9A	TOTAL	MEDICARE/MEDI-CAL CROSSOVER UNITS 10/01/04 - 06/30/05	0	0	0 *
74	MH 1966A	10	TOTAL	ENHANCED SD/MC (CHILDREN) UNITS 07/01/04 - 09/30/04	13,638	(6,373)	7,265 *
75	MH 1966A	10A	TOTAL	ENHANCED SD/MC (CHILDREN) UNITS 10/01/04 - 06/30/05	16,013	6,657	22,670 *
76	MH 1966A	10B	TOTAL	ENHANCED SD/MC (REFUGEES) UNITS 07/01/04 - 06/30/05	0	300	300 *
77	MH 1966A	11	TOTAL	HEALTHY FAMILIES (SED) UNITS 07/01/04 - 09/30/04	56,557	(37,177)	19,380 *
78	MH 1966A	11A	TOTAL	HEALTHY FAMILIES (SED) UNITS 10/01/04 - 06/30/05	29,119	28,151	57,270 *
		Info	TOTAL		<u>8,600,145</u>	<u>214,761</u>	<u>8,814,906</u> *
				<p>To adjust the as settled (MH 1966A) SD/MC units of service/time for the County's contract providers to agree with the State DMH Net Approved Claims Report dated March 4, 2009. (Net disallowed claims of 53,053 units). Copies of workpapers detailing adjustments by service functions have been provided to the County.</p>			
				<p>* Balance carried forward to subsequent adjustment. ** Balance brought forward from prior adjustment.</p>			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
CONTRA COSTA COUNTY				00007	123	June 30, 2005	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED MEDICAL UNITS/TIME</u>			
				<u>CONTRACT PROVIDERS</u>			
79	MH 1966A	8	TOTAL	MEDI-CAL UNITS 07/01/04 - 09/30/04	** 1,874,326	526	1,874,852 *
80	MH 1966A	8A	TOTAL	MEDI-CAL UNITS 10/01/04 - 06/30/05	** 6,829,580	(160,743)	6,668,837 *
81	MH 1966A	9	TOTAL	MEDICARE/MEDI-CAL CROSSOVER UNITS 07/01/04 - 09/30/04	** 4,115	(3,582)	533 *
82	MH 1966A	9A	TOTAL	MEDICARE/MEDI-CAL CROSSOVER UNITS 10/01/04 - 06/30/05	** 0	1,952	1,952 *
83	MH 1966A	10	TOTAL	ENHANCED SD/MC (CHILDREN) UNITS 07/01/04 - 09/30/04	** 7,265	201	7,466 *
84	MH 1966A	10A	TOTAL	ENHANCED SD/MC (CHILDREN) UNITS 10/01/04 - 06/30/05	** 22,670	(2,814)	19,856 *
85	MH 1966A	10B	TOTAL	ENHANCED SD/MC (REFUGEES) UNITS 07/01/04 - 06/30/05	** 300	(300)	0 *
86	MH 1966A	11	TOTAL	HEALTHY FAMILIES (SED) UNITS 07/01/04 - 09/30/04	** 19,380	1,012	20,392 *
87	MH 1966A	11A	TOTAL	HEALTHY FAMILIES (SED) UNITS 10/01/04 - 06/30/05	** 57,270	(1,528)	55,742 *
		Info	TOTAL		** <u>8,814,906</u>	<u>(165,276)</u>	<u>8,649,630</u> *
				<p>To adjust the SD/MC units of service/time per the State DMH Net Approved Claims Report to the Net county's records. (Net disallowed claims of 53,530 units). Above adjustments include Phase II. Copies of workpapers detailing adjustments by service functions have been provided to the County.</p>			
				<p>* Balance carried forward to subsequent adjustment. ** Balance brought forward from prior adjustment.</p>			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
CONTRA COSTA COUNTY				00007	123	June 30, 2005	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED MEDICAL UNITS/TIME CONTRACT PROVIDERS</u>			
88	MH 1966A	8	TOTAL	MEDI-CAL UNITS 07/01/04 - 09/30/04	** 1,874,852	(530)	1,874,322 *
89	MH 1966A	8A	TOTAL	MEDI-CAL UNITS 10/01/04 - 06/30/05	** 6,668,837	(2,503)	6,666,334 *
90	MH 1966A	9	TOTAL	MEDICARE/MEDI-CAL CROSSOVER UNITS 07/01/04 - 09/30/04	** 533	610	1,143
-	MH 1966A	9A	TOTAL	MEDICARE/MEDI-CAL CROSSOVER UNITS 10/01/04 - 06/30/05	** 1,952	0	1,952
91	MH 1966A	10	TOTAL	ENHANCED SD/MC (CHILDREN) UNITS 07/01/04 - 09/30/04	** 7,466	(201)	7,265
92	MH 1966A	10A	TOTAL	ENHANCED SD/MC (CHILDREN) UNITS 10/01/04 - 06/30/05	** 19,856	(557)	19,299
-	MH 1966A	10B	TOTAL	ENHANCED SD/MC (REFUGEES) UNITS 07/01/04 - 06/30/05	** 0	0	0
93	MH 1966A	11	TOTAL	HEALTHY FAMILIES (SED) UNITS 07/01/04 - 09/30/04	** 20,392	(1,012)	19,380
94	MH 1966A	11A	TOTAL	HEALTHY FAMILIES (SED) UNITS 10/01/04 - 06/30/05	** 55,742	463	56,205
		Info	TOTAL		** 8,649,630	(3,730)	8,645,900
				To adjust SD/MC units to incorporate the controls of the lower of the County records or the State DMH Approved Claims Report. Above adjustments include Phase II. Copies of workpapers detailing adjustments by service functions have been provided to the county.			
95	MH 1966A	8	TOTAL	MEDI-CAL UNITS 07/01/04 - 09/30/04	** 1,874,322	(60)	1,874,262
				To adjust SD/MC units to incorporate the controls of the higher of the County records or the State DMH Disallowed Units Report. Above adjustments include Phase II. Copies of workpapers detailing adjustments by service functions have been provided to the county.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				Provider Number		No. of Adj.		Fiscal Period Ended																																																																
CONTRA COSTA COUNTY				00007		123		June 30, 2005																																																																
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS		As Reported		Increase (Decrease)		As Adjusted																																																														
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96	MH 1966A	8A	TOTAL	<p><u>ADJUSTMENTS TO REPORTED MEDICAL UNITS/TIME CONTRACT PROVIDERS</u></p> <p>MEDI-CAL UNITS 10/01/04 - 06/30/05</p> <p>To limit the approved SD/MC units to the Audited Total Units. Copies of workpapers detailing adjustments by service functions have been provided to the county.</p> <table><tr><td>FEE FOR SERVICE (LE# 00F07)</td><td>15/60</td><td>(735)</td></tr><tr><td>EDGEWOOD CENTER FOR CHILDREN (LE# 00273)</td><td>15/58</td><td>(1,625)</td></tr><tr><td>SCHUMAN LILES CLINIC (LE# 00375)</td><td>15/10</td><td>(1,260)</td></tr><tr><td></td><td>15/60</td><td>(720)</td></tr><tr><td>FAMILY SERVICE AGENCY OF MARIN (LE# 00458)</td><td>15/10</td><td>(220)</td></tr><tr><td>SUMMIT VIEW TREATMENT CTR (LE# 00461)</td><td>15/60</td><td>(60)</td></tr><tr><td>MOSS REACH HOMES, INC. (LE# 00467)</td><td>15/10</td><td>(5,850)</td></tr><tr><td></td><td>15/60</td><td>(635)</td></tr><tr><td>ASIAN PACIFIC PSYCHOLOGICAL SERV (LE# 00534)</td><td>15/60</td><td>(355)</td></tr><tr><td>CHARIS YOUTH CENTER (LE# 00541)</td><td>15/60</td><td>(92)</td></tr><tr><td>WEST COAST CHILDREN'S CENTER (LE# 00641)</td><td>15/10</td><td>(13,234)</td></tr><tr><td>BATTERED WOMEN'S ALTERNATIVE (LE# 00645)</td><td>15/10</td><td>(1,871)</td></tr><tr><td>THE FAMILY INSTITUTE OF PINOLE (LE# 00667)</td><td>15/10</td><td>(8,154)</td></tr><tr><td>PORTIA BELL HUME BEHAVIORAL HL+E799</td><td>15/10</td><td>(6,420)</td></tr><tr><td>FAMILY SERVICE OF SAN LEANDRO (LE# 00758)</td><td>15/10</td><td>(120)</td></tr><tr><td>HIAWATHA HARRIS MD INC. (LE# 00857)</td><td>15/10</td><td>(220)</td></tr><tr><td></td><td>15/60</td><td>(220)</td></tr><tr><td>FAMILY AND CHILD COUNSELING CTR (LE# 00869)</td><td>15/10</td><td>(60)</td></tr><tr><td></td><td>15/60</td><td>(60)</td></tr><tr><td>NEW DIRECTIONS COUNSELING CENT (LE# 01074)</td><td>15/10</td><td>(1,850)</td></tr><tr><td></td><td></td><td><u>(43,761)</u></td></tr></table>		FEE FOR SERVICE (LE# 00F07)	15/60	(735)	EDGEWOOD CENTER FOR CHILDREN (LE# 00273)	15/58	(1,625)	SCHUMAN LILES CLINIC (LE# 00375)	15/10	(1,260)		15/60	(720)	FAMILY SERVICE AGENCY OF MARIN (LE# 00458)	15/10	(220)	SUMMIT VIEW TREATMENT CTR (LE# 00461)	15/60	(60)	MOSS REACH HOMES, INC. (LE# 00467)	15/10	(5,850)		15/60	(635)	ASIAN PACIFIC PSYCHOLOGICAL SERV (LE# 00534)	15/60	(355)	CHARIS YOUTH CENTER (LE# 00541)	15/60	(92)	WEST COAST CHILDREN'S CENTER (LE# 00641)	15/10	(13,234)	BATTERED WOMEN'S ALTERNATIVE (LE# 00645)	15/10	(1,871)	THE FAMILY INSTITUTE OF PINOLE (LE# 00667)	15/10	(8,154)	PORTIA BELL HUME BEHAVIORAL HL+E799	15/10	(6,420)	FAMILY SERVICE OF SAN LEANDRO (LE# 00758)	15/10	(120)	HIAWATHA HARRIS MD INC. (LE# 00857)	15/10	(220)		15/60	(220)	FAMILY AND CHILD COUNSELING CTR (LE# 00869)	15/10	(60)		15/60	(60)	NEW DIRECTIONS COUNSELING CENT (LE# 01074)	15/10	(1,850)			<u>(43,761)</u>	**	6,666,334	(43,761)	6,622,573
FEE FOR SERVICE (LE# 00F07)	15/60	(735)																																																																						
EDGEWOOD CENTER FOR CHILDREN (LE# 00273)	15/58	(1,625)																																																																						
SCHUMAN LILES CLINIC (LE# 00375)	15/10	(1,260)																																																																						
	15/60	(720)																																																																						
FAMILY SERVICE AGENCY OF MARIN (LE# 00458)	15/10	(220)																																																																						
SUMMIT VIEW TREATMENT CTR (LE# 00461)	15/60	(60)																																																																						
MOSS REACH HOMES, INC. (LE# 00467)	15/10	(5,850)																																																																						
	15/60	(635)																																																																						
ASIAN PACIFIC PSYCHOLOGICAL SERV (LE# 00534)	15/60	(355)																																																																						
CHARIS YOUTH CENTER (LE# 00541)	15/60	(92)																																																																						
WEST COAST CHILDREN'S CENTER (LE# 00641)	15/10	(13,234)																																																																						
BATTERED WOMEN'S ALTERNATIVE (LE# 00645)	15/10	(1,871)																																																																						
THE FAMILY INSTITUTE OF PINOLE (LE# 00667)	15/10	(8,154)																																																																						
PORTIA BELL HUME BEHAVIORAL HL+E799	15/10	(6,420)																																																																						
FAMILY SERVICE OF SAN LEANDRO (LE# 00758)	15/10	(120)																																																																						
HIAWATHA HARRIS MD INC. (LE# 00857)	15/10	(220)																																																																						
	15/60	(220)																																																																						
FAMILY AND CHILD COUNSELING CTR (LE# 00869)	15/10	(60)																																																																						
	15/60	(60)																																																																						
NEW DIRECTIONS COUNSELING CENT (LE# 01074)	15/10	(1,850)																																																																						
		<u>(43,761)</u>																																																																						
<p>* Balance carried forward to subsequent adjustment. ** Balance brought forward from prior adjustment.</p>																																																																								

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended																																																																															
CONTRA COSTA COUNTY				00007	123	June 30, 2005																																																																															
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted																																																																														
Adj. No.	Form/ Sch.	Line	Col.																																																																																		
97	MH 1966A	2	TOTAL	<div><div><div>ADJUSTMENTS TO REPORTED TOTAL UNITS</div><div>CONTRACT PROVIDERS</div></div><div>TOTAL UNITS 07/01/04 - 06/30/05</div><div>To adjust the reported Total Units at the service function level for the Contract Providers to agree with the County's records.</div><table><tr><td>FEE FOR SERVICE (LE# 00F07)</td><td>15/10</td><td>8,040</td></tr><tr><td></td><td>15/60</td><td>13,395</td></tr><tr><td>FRED FINCH YOUTH CENTER (LE# 00113)</td><td>15/10</td><td>35</td></tr><tr><td>SENECA CENTER (LE# 00115)</td><td>15/10</td><td>71</td></tr><tr><td></td><td>15/58</td><td>297</td></tr><tr><td>CONTRA COSTA ASSOC. OF RETARD (LE# 00119)</td><td>15/01</td><td>90</td></tr><tr><td></td><td>15/10</td><td>2,609</td></tr><tr><td>FAMILIES FIRST INC. (LE# 00120)</td><td>10/95</td><td>1</td></tr><tr><td>WE CARE SOCIETY, INC (LE# 00121)</td><td>15/10</td><td>2,745</td></tr><tr><td>EARLY CHILDHOOD MH PROGRAM (LE# 00124)</td><td>15/10</td><td>23,733</td></tr><tr><td>PHOENIX PROGRAMS, INC</td><td>10/95</td><td>146</td></tr><tr><td></td><td>15/10</td><td>13,955</td></tr><tr><td>EDGEWOOD CENTER FOR CHILDREN (LE# 00273)</td><td>10/85</td><td>(220)</td></tr><tr><td></td><td>15/58</td><td>(1,845)</td></tr><tr><td></td><td>15/60</td><td>(961)</td></tr><tr><td>MILHOUS CHILDREN'S SERVICES (LE# 00386)</td><td>15/10</td><td>(1,375)</td></tr><tr><td></td><td>15/60</td><td>(1,786)</td></tr><tr><td>RUBICON PROGRAMS, INC (LE# 00444)</td><td>15/10</td><td>5,336</td></tr><tr><td>SUMMIT VIEW TREATMENT CTR (LE# 00461)</td><td>10/85</td><td>11</td></tr><tr><td>MOSS REACH HOMES, INC. (LE# 00467)</td><td>15/10</td><td>420</td></tr><tr><td>CHARIS YOUTH CENTER (LE# 00541)</td><td>10/85</td><td>9</td></tr><tr><td>CHILD THERAPY INSTITUTE (LE# 00620)</td><td>15/10</td><td>481</td></tr><tr><td>PORTIA BELL HUME BEHAVIORAL HL (LE# 00700)</td><td>15/10</td><td>(2,340)</td></tr><tr><td>BAY AREA PSYCHOTHERAPY SERV (LE# 00750)</td><td>15/10</td><td>1,641</td></tr><tr><td>A BETTER WAY (LE# 00765)</td><td>15/10</td><td>63</td></tr><tr><td>PSYCHOTHERAPY INSTITUTE OF IND. FA (LE# 00770)</td><td>15/10</td><td>490</td></tr></table><div><div>* Balance carried forward to subsequent adjustment.</div><div>** Balance brought forward from prior adjustment.</div></div></div>	FEE FOR SERVICE (LE# 00F07)	15/10	8,040		15/60	13,395	FRED FINCH YOUTH CENTER (LE# 00113)	15/10	35	SENECA CENTER (LE# 00115)	15/10	71		15/58	297	CONTRA COSTA ASSOC. OF RETARD (LE# 00119)	15/01	90		15/10	2,609	FAMILIES FIRST INC. (LE# 00120)	10/95	1	WE CARE SOCIETY, INC (LE# 00121)	15/10	2,745	EARLY CHILDHOOD MH PROGRAM (LE# 00124)	15/10	23,733	PHOENIX PROGRAMS, INC	10/95	146		15/10	13,955	EDGEWOOD CENTER FOR CHILDREN (LE# 00273)	10/85	(220)		15/58	(1,845)		15/60	(961)	MILHOUS CHILDREN'S SERVICES (LE# 00386)	15/10	(1,375)		15/60	(1,786)	RUBICON PROGRAMS, INC (LE# 00444)	15/10	5,336	SUMMIT VIEW TREATMENT CTR (LE# 00461)	10/85	11	MOSS REACH HOMES, INC. (LE# 00467)	15/10	420	CHARIS YOUTH CENTER (LE# 00541)	10/85	9	CHILD THERAPY INSTITUTE (LE# 00620)	15/10	481	PORTIA BELL HUME BEHAVIORAL HL (LE# 00700)	15/10	(2,340)	BAY AREA PSYCHOTHERAPY SERV (LE# 00750)	15/10	1,641	A BETTER WAY (LE# 00765)	15/10	63	PSYCHOTHERAPY INSTITUTE OF IND. FA (LE# 00770)	15/10	490	9,637,636	67,344	9,704,980
FEE FOR SERVICE (LE# 00F07)	15/10	8,040																																																																																			
	15/60	13,395																																																																																			
FRED FINCH YOUTH CENTER (LE# 00113)	15/10	35																																																																																			
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MILHOUS CHILDREN'S SERVICES (LE# 00386)	15/10	(1,375)																																																																																			
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PORTIA BELL HUME BEHAVIORAL HL (LE# 00700)	15/10	(2,340)																																																																																			
BAY AREA PSYCHOTHERAPY SERV (LE# 00750)	15/10	1,641																																																																																			
A BETTER WAY (LE# 00765)	15/10	63																																																																																			
PSYCHOTHERAPY INSTITUTE OF IND. FA (LE# 00770)	15/10	490																																																																																			

AUDIT ADJUSTMENTS

Provider				CONTRA COSTA COUNTY		Provider Number	00007	No. of Adj.	123	Fiscal Period Ended		June 30, 2005
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS				As Reported	Increase (Decrease)	As Adjusted		
Adj. No.	Form/ Sch.	Line	Col.									
				<u>ADJUSTMENTS TO REPORTED TOTAL UNITS</u> <u>CONTRACT PROVIDERS</u>								
				CONTINUED FROM PREVIOUS PAGE								
				YWCA OF CONTRA COSTA (LE# 01032) 15/10 780								
				YOUTH HOMES INC (LE# 01089) 15/10 150								
				RUBINO COUNSELING SERVICES (LE# 01131) 15/10 60								
				BAY AREA PSYCHOTHERAPY (LE# 01139) 15/10 (395)								
				DISCOVERY COUNSELING CENTER (LE# 01143) 15/10 60								
				THE LUCAS CENTER (LE# 01157) 15/10 590								
				CARRIE MCCLUER ASSOCIATES (LE# 01165) 15/10 878								
				AMADOR INSTITUTE (LE# 01236) 15/10 180								
				<u>67,344</u>								
* Balance carried forward to subsequent adjustment.												
** Balance brought forward from prior adjustment.												

AUDIT ADJUSTMENTS

Provider CONTRA COSTA COUNTY				Provider Number 00007	No. of Adj. 123	Fiscal Period Ended June 30, 2005	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO PATIENT AND OTHER PAYOR REVENUE - COUNTY</u>			
98	MH 1968	28	E	PATIENT AND OTHER PAYOR REVENUE - I/P (07/01/04 - 09/30/04)	\$ 486,025	\$ 41,014	\$ 527,039
99	MH 1968	28A	E	PATIENT AND OTHER PAYOR REVENUE - I/P (10/01/04 - 06/30/05)	\$ 1,640,790	\$ 174,208	\$ 1,814,998
100	MH 1968	28	K	PATIENT AND OTHER PAYOR REVENUE - O/P (07/01/04 - 09/30/04)	\$ -	\$ 24,138	\$ 24,138
101	MH 1968	28A	K	PATIENT AND OTHER PAYOR REVENUE - O/P (10/01/04 - 06/30/05)	\$ -	\$ 87,835	\$ 87,835
				<u>ADJUSTMENTS TO PATIENT AND OTHER PAYOR REVENUE - CONTRACT PROVIDERS</u>			
102	MH 1968	28	K	PATIENT AND OTHER PAYOR REVENUE - O/P (07/01/04 - 09/30/04)	\$ -	\$ 1,082	\$ 1,082
103	MH 1968	28A	K	PATIENT AND OTHER PAYOR REVENUE - O/P (10/01/04 - 06/30/05)	\$ -	\$ 3,137	\$ 3,137
				<p>To adjust patient and other payor revenue to agree with the county's records. However, the Hospital Inpatient (SF 05/10) crossover revenue was limited to the lower of Medi/Medi Crossover cost, SMA, or Published charge. Crossover revenue for SF 05/19 was limited to the lower of Medi/Medi Crossover cost, SMA, or Published charges plus Audited Ancillary rate.</p>			
				<p>* Balance carried forward to subsequent adjustment. ** Balance brought forward from prior adjustment.</p>			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
CONTRA COSTA COUNTY				00007	123	June 30, 2005	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED SETTLEMENT</u>			
104	MH 1979	2	D	CONTRACT PROVIDERS MEDI-CAL DIRECT SERVICE GROSS REIMB	\$ 21,467,073	\$ (62,180)	\$ 21,404,893
105	MH 1979	7A	D	CONTRACT PROVIDERS HEALTHY FAMILIES DIRECT SERVICE GROSS REIMB	\$ 220,530	\$ (56,523)	\$ 164,007
				To adjust reported Contract Provider Direct Medi-Cal and Healthy Families Gross Reimbursement as a result of adjustments to the contract providers SD/MC units of service/time.			
106	MH 1979	21	J	TOTAL SD/MC REIMBURSEMENT (FFP) - COUNTY	\$ 17,766,539	\$ (465,701)	\$ 17,300,838
107	MH 1979	27	J	TOTAL HEALTHY FAMILIES REIMBURSEMENT - COUNTY	\$ 108,864	\$ (1,429)	\$ 107,435
				TOTAL REIMBURSEMENT - COUNTY	\$ 17,875,403	\$ (467,130)	\$ 17,408,273
108	Sch. 3b	Total	24	TOTAL SD/MC REIMBURSEMENT - CONTRACT PROVIDERS	\$ 9,797,047	\$ (34,277)	\$ 9,762,770 *
109	Sch. 3b	Total	25	TOTAL HEALTHY FAMILIES REIMBURSEMENT - CONTRACT PROVIDERS	\$ 143,345	\$ (36,744)	\$ 106,601 *
				TOTAL REIMBURSEMENT - CONTRACT PROVIDERS	\$ 9,940,392	\$ (71,021)	\$ 9,869,371 *
				To adjust Total SD/MC Reimbursement (FFP) due to the adjustments to reported costs and units.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
CONTRA COSTA COUNTY				00007	123	June 30, 2005	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
110	Sch. 3b	Total	Info Info 28	<u>ADJUSTMENTS TO REPORTED SETTLEMENT</u>			
				TOTAL SD/MC REIMBURSEMENT - CONTRACT PROVIDERS			
				TOTAL HEALTHY FAMILIES REIMBURSEMENT - CONTRACT PROVIDERS			
				TOTAL REIMBURSEMENT - CONTRACT PROVIDERS			
				To adjust Total SD/MC Reimbursement (FFP) due to the limit of FFP Contract Maximum.			
				MOSS REACH HOMES, INC. (LE# 00467) \$ (22,884)			
				S.T.A.R.S. (LE# 00551) \$ (9,483)			
				WEST CONTRA COSTA USD (LE# 01182) \$ (94,893)			
				THE FAMILY INSTITUTE OF PINOLE (LE# 00667) \$ (86,062)			
				PORTIA BELL HUME BEHAVIORAL (LE# 00700) \$ (8,424)			
111	Sch. 3b	Total	Info Info	BAY AREA PSYCHOTHERAPY SERV (LE# 00750) \$ (49,285)			
				CARRIE McCLUER LE# 01165) \$ (21,787)			
				WEST CONTRA COSTA USD (LE# 01182) \$ (856)			
				\$ (293,674)			
				TOTAL REIMBURSEMENT - CONTRACT PROVIDERS			
				To adjust Total SD/MC Reimbursement (FFP) to include the result of the Department's revised audit of the EPSDT Program conducted by the State Department of Mental Health as reflected in the report dated March 3, 2008. The report covered the period from July 1, 2004 through June 30, 2005. This represents the revised recoupment.			
				LINCOLN CHILD CENTER (LE# 00112) \$ (11,035)			
				S.T.A.R.S. (LE# 00551) \$ (6,060)			
				RAPE CRISIS CENTER (LE# 00639) \$ (436)			
				FAMILY STRESS CENTER (LE# 00642) \$ (431)			
A BETTER WAY (LE# 00765) \$ (65)							
\$ (18,027)							
* Balance carried forward to subsequent adjustment.							
** Balance brought forward from prior adjustment.							
					** \$ 9,762,770	(293,674)	\$ 9,469,096 *
					** \$ 106,601	0	\$ 106,601 *
					** \$ 9,869,371	\$ (293,674)	\$ 9,575,697 *
					** \$ 9,469,096	(18,027)	\$ 9,451,069
					** \$ 106,601	0	\$ 106,601
					** \$ 9,575,697	\$ (18,027)	\$ 9,557,670

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
CONTRA COSTA COUNTY				00007	123	June 30, 2005	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
<u>ADJUSTMENT TO AS SETTLED EPSDT STATE GENERAL FUNDS</u>							
112	SCH 4	1	3	SD/MC ACTUALS	\$ 40,746,893	\$ (730,589)	\$ 40,016,304
				To adjust SD/MC actuals as a result of adjustments to total computable Medical Costs as reflected in the MH 1979 form for both the County Program and its Contract Providers. The amounts utilized for this purpose was SD/MC and Enhanced for Outpatient services only.			
113	SCH 4	2	3	TOTAL SD/MC CLAIMS	\$ 40,867,475	\$ (62,585)	\$ 40,804,890 *
114	SCH 4	4	3	EPSDT CLAIMS	\$ 25,223,169	\$ (62,585)	\$ 25,160,584 *
				To adjust Total SD/MC claims and EPSDT claims to include the results of the Department's audit of the EPSDT Program conducted by the State Department of Mental Health as reflected in the report dated March 3, 2008. The report covered the period from July 1, 2004 through June 30, 2005. This represents the original recoupment.			
115	SCH 4	2	3	TOTAL SD/MC CLAIMS	** \$ 40,804,890	\$ 62,585	\$ 40,867,475 *
116	SCH 4	4	3	EPSDT CLAIMS	** \$ 25,160,584	\$ 62,585	\$ 25,223,169 *
				To adjust SD/MC claims and EPSDT claims to reverse the original recoupment included in adjustments 112 and 113 above. The revised findings affecting "Total SD/MC Claims and EPSDT Claims" will be taken in adjustments 116 and 117 below.			
* Balance carried forward to subsequent adjustment.							
** Balance brought forward from prior adjustment.							

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
CONTRA COSTA COUNTY				00007	123	June 30, 2005	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENT TO AS SETTLED EPSDT STATE GENERAL FUNDS</u>			
117	SCH 4	2	3	TOTAL SD/MC CLAIMS	** \$ 40,867,475	\$ (36,054)	\$ 40,831,421
118	SCH 4	4	3	EPSDT CLAIMS	** \$ 25,223,169	\$ (36,054)	\$ 25,187,115
				To adjust Total SD/MC claims and EPSDT claims to include the results of the Department's revised audit of the EPSDT Program conducted by the State Department of Mental Health as reflected in the report dated March 3, 2008. The report covered the period from July 1, 2004 through June 30, 2005. This represents the revised recoupment.			
				Lincoln Child Center LE# 00112	\$ (22,070)		
				S.T.A.R.S. (LE# 00551)	\$ (12,120)		
				Rape Crisis Center (LE# 00639)	\$ (873)		
				Family Stress Center (LE# 00642)	\$ (861)		
				A Better Way (LE# 00765)	\$ (130)		
					<u>\$ (36,054)</u>		
119	SCH 4	10	3	NET COST SETTLEMENT AMOUNT	\$ 9,861,211	\$ (208,856)	\$ 9,652,355
				To adjust net cost settlement amount as a result of adjustments to SD/MC actuals (Total Computable Medical), Total SD/MC claims and EPSDT claims.			
120	SCH 4	11	3	STATE GENERAL FUND DISTRIBUTION	\$ 9,861,211	\$ (22,174)	\$ 9,839,037 *
				To adjust State General Fund Distribution to include the results of the department's audit of the EPSDT Program conducted by the State Department of Mental Health as reflected in the report dated March 3, 2008. The report covered the period from July 1, 2004 through June 30, 2005. This represents the SGF original recoupment.			
121	SCH 4	11	3	STATE GENERAL FUND DISTRIBUTION	** \$ 9,839,037	\$ 22,174	\$ 9,861,211 *
				To adjust State General Fund Distribution to reverse the original SGF recoupment included in adjustments 119 above. The revised findings affecting "State General Fund Distribution" will be taken in adjustments 121 below.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
CONTRA COSTA COUNTY				00007	123	June 30, 2005	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENT TO AS SETTLED EPSDT STATE GENERAL FUNDS</u>			
122	SCH 4	11	3	STATE GENERAL FUND DISTRIBUTION To adjust the State General Fund Distribution to reflect the results of the revised EPSDT findings included in the final report dated March 3, 2008. LINCOLN CHILD CENTER (LE# 00112) \$ (8,334) S.T.A.R.S. (LE# 00551) \$ (4,577) RAPE CRISIS CENTER (LE# 00639) \$ (329) FAMILY STRESS CENTER (LE# 00642) \$ (325) A BETTER WAY (LE# 00765) \$ (49) <u>\$ (13,614)</u>	** \$ 9,861,211	\$ (13,614)	\$ 9,847,597 *
123	SCH 4	11	3	STATE GENERAL FUND DISTRIBUTION To adjust audited State General Funds due State to incorporate the result of adjustments 111 through 121 above.	** \$ 9,847,597	\$ (195,243)	\$ 9,652,354

* Balance carried forward to subsequent adjustment.
** Balance brought forward from prior adjustment.

**CONTRA COSTA COUNTY
COMMUNITY MENTAL HEALTH SERVICES
SHORT-DOYLE/MEDI-CAL PROGRAM
FINDINGS AND RECOMMENDATIONS
FOR FISCAL YEAR ENDED JUNE 30, 2005**

FINDING 1 – MENTAL HEALTH EXPENDITURES

Our review disclosed that the County's methodology of reporting Mental Health Expenditures, MH 1960, ln. 1, col. 3 was net of Other and Medi-Cal adjustments and other reconciling items. This has been the County's methodology in the past and currently.

The County was not in compliance with the cost report instructions for MH 1960, ln. 1, col. 3 wherein it states in part that County legal entities should report the total gross expenditures for the county mental health department or division from the county auditor-controller's report. It also states that the reported amount on line 1, column 3 should match the total on the summary page of the auditor-controller's report, or the county should maintain workpapers that reconcile the amount reported on line 1, column 3 to the auditor-controller's report.

For this year, the County has prepared and provided a reconciliation workpaper dated 05/20/09.

AUDIT AUTHORITY:

HCFA Pub. 15-I, Section 2304

RECOMMENDATION:

We recommend that the County comply with the cost report instructions and exercise due care in the preparation of the cost report. All workpapers utilized in the preparation of the cost report must be properly filed and kept to facilitate the audit.

AUDITEE'S RESPONSE:

We agree with the recommendation. All Cost Report workpapers are properly kept and available to the State Auditors.

**CONTRA COSTA COUNTY
COMMUNITY MENTAL HEALTH SERVICES
SHORT-DOYLE/MEDI-CAL PROGRAM
FINDINGS AND RECOMMENDATIONS
FOR FISCAL YEAR ENDED JUNE 30, 2005**

FINDING 2 – FFP CONTRACT MAXIMUM

Several of the county's contract providers have its FFP contract maximum less than its FFP reimbursable cost.

AUDIT AUTHORITY:

Various provider contracts.

RECOMMENDATION:

Since final reimbursement is determined by taking the lower of FFP contract maximum and the FFP reimbursable cost, we recommend that the County review the maximum payable amount in its provider contracts and make necessary amendments so the maximum amount payable under the contract does not fall below reimbursable cost.

AUDITEE'S RESPONSE:

We disagree with the Adjustment. The adjustment disallowing the actual payments over the Contract Maximum Amount is not supported by any State Regulations & Instructions.

The disallowed amounts are valid expenditures subject to the internal controls of the Auditor-Controller Office. The Contracts are not the only basis in making payments to Contractors. A Board authorized directive, a Purchase Order, & a Board adopted Warrant Process are legitimate ways to make payments to third parties.

**CONTRA COSTA COUNTY
COMMUNITY MENTAL HEALTH SERVICES
SHORT-DOYLE/MEDI-CAL PROGRAM
FINDINGS AND RECOMMENDATIONS
FOR FISCAL YEAR ENDED JUNE 30, 2005**

FINDING 3 – TOTAL UNITS

In our field audit, we utilized as supporting documentation for total units the County's CCC 864 reports. Our examination revealed that the reported total units for the County and several of its contract providers were understated. (See Audit Adjustments 39-45, 97) The effect of this is overstating the cost per unit, thus overstating the Short-Doyle/Medi-Cal FFP settlement.

AUDIT AUTHORITY:

California Code of Regulations, Title 9, Section 640

RECOMMENDATION:

We recommend that the County investigate its current tracking mechanism and exercise due care in the preparation of the SD/MC cost report. This will ensure accuracy and reliability of the reported units. Accurate units of service are necessary in determining the cost per unit that is in turn used to determine Medi-Cal program reimbursements.

AUDITEE'S RESPONSE:

The recommendation is noted.

DETAIL COST REPORT

CALCULATION OF PROGRAM COSTS

MH 1960 (Rev. 7/05)

County: CONTRA COSTA COUNTY
County Code: 07

Legal Entity: CONTRA COSTA COUNTY		A	B	C
Legal Entity Number: 00007		Salaries and Benefits	Other	Total Costs
1	Mental Health Expenditures	40,099,794	62,869,000	102,968,794
2	Encumbrances		(576,742)	(576,742)
3	Less: Payments to Contract Providers (County Only)		(34,414,179)	(34,414,179)
4	Other Adjustments from MH 1962	(6,116)	(487,481)	(493,597)
5	Total Costs Before Medi-Cal Adjustments	40,093,678	27,390,598	67,484,276
6	Medi-Cal Adjustments from MH 1961		(27,549)	(27,549)
7	Managed Care Consolidation (County Only)			
8	Allowable Costs for Allocation			67,456,727
Administrative Costs (County Only)				
9	SD/MC Administration			6,735,478
10	Healthy Families Administration			31,280
11	Non-SD/MC Administration			4,188,552
12	Total Administrative Costs			10,955,310
Utilization Review Costs (County Only)				
13	Skilled Professional Medical Personnel			705,433
14	Other SD/MC Utilization Review			596,191
15	Non-SD/MC Utilization Review			752,045
16	Total Utilization Review Costs			2,053,669
17	Research and Evaluation (County Only)			
18	Mode Costs (Direct Service and MAA)			54,447,748
19	Total Costs - Lines 9 through 18			67,456,727

DETAIL COST REPORT

MEDI-CAL ADJUSTMENTS TO COSTS

MH 1961 (Rev. 7/05)

County: CONTRA COSTA COUNTY
County Code: 07

Legal Entity: CONTRA COSTA COUNTY		A	B	C
Legal Entity Number: 00007		Salaries and Benefits	Other	Total Adjustments
1	Hospital Admin Days Ancillary Costs		117,750	117,750
2				
3				
4	Per Audit:			
5	Adjust Hosp. Admin Days to agree with County records		(145,299)	(145,299)
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20	Total Adjustments		(27,549)	(27,549)

DETAIL COST REPORT

OTHER ADJUSTMENTS

MH 1962 (Rev. 7/05)

County: CONTRA COSTA COUNTY
County Code: 07

Legal Entity: CONTRA COSTA COUNTY		A	B	C
Legal Entity Number: 00007		Salaries and Benefits	Other	Total Adjustments
1	Add, Calworks cost		785,573	785,573
2	Adjust, MHSA prop. 63 expenditure	(6,116)	(159,293)	(165,409)
3				
4				
5	Per Audit:			
6	To adjust Calworks cost.		(644,233)	(644,233)
7	To adjust COWCAP A-87.		(469,528)	(469,528)
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20	Total Adjustments	(6,116)	(487,481)	(493,597)

DETAIL COST REPORT

PAYMENTS TO CONTRACT PROVIDERS

MH 1963 (Rev. 7/05)

FISCAL YEAR 2004 - 2005

County: CONTRA COSTA COUNTY
County Code: 07

A	B	C	D
Item	Legal Entity Name	Legal Entity Number	Amount Paid
1	La Cheim	00106	704,600
2	Telecare Corporation	00108	656,537
3	Asian Community Mental Health services	00109	123,268
4	Lincoln Child center	00112	1,451,305
5	Fred Finch youth center	00113	1,001,703
6	Seneca	00115	4,190,945
7	CCARC-Lynn center	00119	756,918
8	Families First	00120	723,666
9	We care Society	00121	1,145,752
10	YMCA of the East Bay	00122	300,897
11	Familias Unidas Counseling	00123	390,201
12	Early Childhood Mental Health Program	00124	1,372,154
13	Phoenix Program	00125	2,750,562
14	Canyon Manor	00272	109,566
15	Edgewood Center for Children& Families	00273	194,902
16	Schuman Lifes Clinic	00375	27,180
17	Milhous Ranch	00386	97,528
18	Rubicon Programs	00444	1,377,420
19	Mental Health Consumer Concerns	00445	620,278
20	Sunny Hills Children's Garden	00457	73,242
21	Family Service Agency of Marin	00458	2,315
22	Summit View Treatment Center	00461	45,263
23	Aspira Community Counseling Center	00467	148,974
24	Youth & Family Services	00520	23,069
25	Asian Pacific Psychological Services	00534	389,811
26	Thunder Road	00536	315,092
27	Charis Youth Center	00541	83,709
28	Stars Circle of care	00551	375,000
29	Child Thearapy Institute	00620	26,364
30	Community violence Solutions	00639	278,736
31	West Coast Children's Center	00641	98,749
32	Family Stress Center	00642	754,682
33	Jewish Family &Children Services	00643	101,548
34	Catholic Counseling	00644	2,408
35	Stand	00645	21,791
36	Family Institute of Pinole	00667	133,809
37	TouchStone Counseling Center	00670	176,943
38	Portia Bell Hume Center	00700	101,912
39	Pine Tree Garden	00707	43,505

DETAIL COST REPORT

PAYMENTS TO CONTRACT PROVIDERS

MH 1963 (Rev. 7/05)

FISCAL YEAR 2004 - 2005

County: CONTRA COSTA COUNTY
County Code: 07

A	B	C	D
Item	Legal Entity Name	Legal Entity Number	Amount Paid
40	California Psychiatric Trasitiions	00710	168,240
41	Bay area Psychotherapy services	00750	213,435
42	Family Service of An Leandro	00758	2,975
43	Family Services of Tri-cities	00759	4,753
44	A better way Inc	00765	4,123
45	Psychotherapy Institute of Individual,Family,community	00770	52,836
46	Bay Area Community Resources	00773	450,240
47	New Connections	00835	143,844
48	Hiawatha Harris MD	00857	5,004
49	Family& Child Counseling center	00869	15,894
50	Crestwod Manor	00949	8,815,570
51	YMCA of the Contra Costa	01032	81,753
52	West Contra costa youth service bureau	01060	504,710
53	North Berkeley Counseling center	01067	7,694
54	New Directions Counseling	01074	9,934
55	Youth Homes Inc	01089	486,239
56	Mt.Diablo USD wrap and Counseling	01109	92,262
57	Rubino counseling Center	01131	23,700
58	BAP Training Institute	01139	30,930
59	Discovery Counseling Center	01143	25,265
60	The Lucas Center	01157	88,965
61	Carrie Mccluer &associates	01165	46,448
62	West Contra Costa USD	01182	50,000
63	Amador Institute	01236	9,832
64	Fee for Service		1,887,229
65			
	Total Payments to Contract Providers		34,414,179

State of California Health and Human Services Agency

DETAIL COST REPORT

ALLOCATION OF COSTS TO MODES OF SERVICE

MH 1964 (Rev. 7/05)

County: CONTRA COSTA COUNTY

County Code: 07

Legal Entity: CONTRA COSTA COUNTY		A
Legal Entity Number: 00007		Total Costs
1	Mode Costs (Direct Service and MAA) from MH 1960	54,447,748
	Modes	
2	Hospital Inpatient Services (Mode 05-SFC 10-19)	17,974,706
3	Other 24 Hour Services (Mode 05-All Other SFC)	
4	Day Services (Mode 10)	4,304,671
5	Outpatient Services (Mode 15 Program 1 + Program 2)	29,705,692
6	Outreach Services (Mode 45)	1,357,952
7	Medi-Cal Administrative Activities (Mode 55)	1,104,727
8	Support Services (Mode 60)	
9	Total - Lines 2 through 8	54,447,748

DETAIL COST REPORT

ALLOCATION OF COSTS TO SERVICE

FUNCTIONS - MODE TOTAL

MH 1966 (Rev. 7/05)

PAGE 1 OF 1

FISCAL YEAR 2004 - 2005

County: CONTRA COSTA COUNTY

County Code: 07

CR

CR

Legal Entity: CONTRA COSTA COUNTY			A	B	C	D	E	F	G
Legal Entity Number: 00007				Service	Service	Service	Service	Service	Service
Mode: 05 - Hospital Inpatient Services (SFC 10-19)			Mode Total	Function	Function	Function	Function	Function	Function
				10	19				
1	Allocation Percentage		100.00%	88.73%	11.27%				
2	Total Units			13,097	1,664				
3	Gross Cost		17,974,705	15,948,426	2,026,279				
4	Cost per Unit			1,217.72	1,217.72				
5	SMA per Unit			913.58	236.82				
6	Published Charge per Unit			1,700.00	1,700.00				
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/04 - 09/30/04		751	193				
8A		10/01/04 - 06/30/05		4,086	1,131				
9	Medicare/Medi-Cal Crossover Units	07/01/04 - 09/30/04		532					
9A		10/01/04 - 06/30/05		1,796					
10	Enhanced SD/MC (Children) Units	07/01/04 - 09/30/04							
10A		10/01/04 - 06/30/05							
10B	Enhanced SD/MC (Refugees) Units	07/01/04 - 06/30/05							
11	Healthy Families (SED) Units	07/01/04 - 09/30/04							
11A		10/01/04 - 06/30/05							
12	Non-Medi-Cal Units			5,932	340				
13	Medi-Cal Costs *	07/01/04 - 09/30/04	1,149,524	914,505	235,019				
13A		10/01/04 - 06/30/05	6,352,824	4,975,588	1,377,236				
14	Medi-Cal SMA Upper Limits *	07/01/04 - 09/30/04	764,471	686,099	78,373				
14A		10/01/04 - 06/30/05	4,192,161	3,732,888	459,273				
15	Medi-Cal Published Charges *	07/01/04 - 09/30/04	1,604,800	1,276,700	328,100				
15A		10/01/04 - 06/30/05	8,868,900	6,946,200	1,922,700				
16	Medi-Cal Negotiated Rates	07/01/04 - 09/30/04							
16A		10/01/04 - 06/30/05							
17	Medicare/Medi-Cal Crossover Costs	07/01/04 - 09/30/04	647,825	647,825					
17A		10/01/04 - 06/30/05	2,187,018	2,187,018					
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/04 - 09/30/04	486,025	486,025					
18A		10/01/04 - 06/30/05	1,640,790	1,640,790					
19	Medicare/Medi-Cal Crossover Published Charges	07/01/04 - 09/30/04	904,400	904,400					
19A		10/01/04 - 06/30/05	3,053,200	3,053,200					
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/04 - 09/30/04							
20A		10/01/04 - 06/30/05							
21	Enhanced SD/MC (Children) Costs	07/01/04 - 09/30/04							
21A		10/01/04 - 06/30/05							
22	Enhanced SD/MC (Children) SMA Upper Limits	07/01/04 - 09/30/04							
22A		10/01/04 - 06/30/05							
23	Enhanced SD/MC (Children) Published Charges	07/01/04 - 09/30/04							
23A		10/01/04 - 06/30/05							
24	Enhanced SD/MC (Children) Negotiated Rates	07/01/04 - 09/30/04							
24A		10/01/04 - 06/30/05							
25	Enhanced SD/MC (Refugees) Costs	07/01/04 - 06/30/05							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/04 - 06/30/05							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/04 - 06/30/05							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/04 - 06/30/05							
29	Healthy Families Costs	07/01/04 - 09/30/04							
29A		10/01/04 - 06/30/05							
30	Healthy Families SMA Upper Limits	07/01/04 - 09/30/04							
30A		10/01/04 - 06/30/05							
31	Healthy Families Published Charges	07/01/04 - 09/30/04							
31A		10/01/04 - 06/30/05							
32	Healthy Families Negotiated Rates	07/01/04 - 09/30/04							
32A		10/01/04 - 06/30/05							
33	Non-Medi-Cal Costs		7,637,515	7,223,491	414,023				

DETAIL COST REPORT

ALLOCATION OF COSTS TO SERVICE
FUNCTIONS - MODE TOTAL

MH 1966 (Rev. 7/05)

PAGE 1 OF 1
FISCAL YEAR 2004 - 2005County: CONTRA COSTA COUNTY
County Code: 07

Legal Entity: CONTRA COSTA COUNTY			A	CR	CR	CR	E	F	G
Legal Entity Number: 00007			Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
Mode: 10 - Day Services									
1	Allocation Percentage		100.00%	20	81	85			
2	Total Units			76.45%	6.85%	16.70%			
3	Gross Cost		4,304,671	47,285	2,779	4,823			
4	Cost per Unit			3,291,085	294,868	718,718			
5	SMA per Unit			69.60	106.11	149.02			
6	Published Charge per Unit			88.42	134.81	189.33			
7	Negotiated Rate / Cost per Unit			105.57	160.94	226.03			
8	Medi-Cal Units	07/01/04 - 09/30/04		5,818	622	909			
8A		10/01/04 - 06/30/05		18,737	1,749	2,444			
9	Medicare/Medi-Cal Crossover Units	07/01/04 - 09/30/04		203					
9A		10/01/04 - 06/30/05		481					
10	Enhanced SD/MC (Children) Units	07/01/04 - 09/30/04				343			
10A		10/01/04 - 06/30/05				412			
10B	Enhanced SD/MC (Refugees) Units	07/01/04 - 06/30/05							
11	Healthy Families (SED) Units	07/01/04 - 09/30/04							
11A		10/01/04 - 06/30/05							
12	Non-Medi-Cal Units			22,046	408	715			
13	Medi-Cal Costs	07/01/04 - 09/30/04	606,395	404,939	65,998	135,458			
13A		10/01/04 - 06/30/05	1,853,896	1,304,115	185,579	364,202			
14	Medi-Cal SMA Upper Limits	07/01/04 - 09/30/04	770,380	514,428	83,852	172,101			
14A		10/01/04 - 06/30/05	2,355,231	1,656,726	235,783	462,723			
15	Medi-Cal Published Charges	07/01/04 - 09/30/04	919,772	614,206	100,105	205,461			
15A		10/01/04 - 06/30/05	2,811,966	1,978,065	281,484	552,417			
16	Medi-Cal Negotiated Rates	07/01/04 - 09/30/04							
16A		10/01/04 - 06/30/05							
17	Medicare/Medi-Cal Crossover Costs	07/01/04 - 09/30/04	14,129	14,129					
17A		10/01/04 - 06/30/05	33,478	33,478					
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/04 - 09/30/04	17,949	17,949					
18A		10/01/04 - 06/30/05	42,530	42,530					
19	Medicare/Medi-Cal Crossover Published Charges	07/01/04 - 09/30/04	21,431	21,431					
19A		10/01/04 - 06/30/05	50,779	50,779					
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/04 - 09/30/04							
20A		10/01/04 - 06/30/05							
21	Enhanced SD/MC Costs	07/01/04 - 09/30/04	51,113			51,113			
21A		10/01/04 - 06/30/05	61,396			61,396			
22	Enhanced SD/MC SMA Upper Limits	07/01/04 - 09/30/04	64,940			64,940			
22A		10/01/04 - 06/30/05	78,004			78,004			
23	Enhanced SD/MC Published Charges	07/01/04 - 09/30/04	77,528			77,528			
23A		10/01/04 - 06/30/05	93,124			93,124			
24	Enhanced SD/MC Negotiated Rates	07/01/04 - 09/30/04							
24A		10/01/04 - 06/30/05							
25	Enhanced SD/MC (Refugees) Costs	07/01/04 - 06/30/05							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/04 - 06/30/05							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/04 - 06/30/05							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/04 - 06/30/05							
29	Healthy Families Costs	07/01/04 - 09/30/04							
29A		10/01/04 - 06/30/05							
30	Healthy Families SMA Upper Limits	07/01/04 - 09/30/04							
30A		10/01/04 - 06/30/05							
31	Healthy Families Published Charges	07/01/04 - 09/30/04							
31A		10/01/04 - 06/30/05							
32	Healthy Families Negotiated Rates	07/01/04 - 09/30/04							
32A		10/01/04 - 06/30/05							
33	Non-Medi-Cal Costs		1,684,264	1,534,424	43,291	106,548			

DETAIL COST REPORT

ALLOCATION OF COSTS TO SERVICE

FUNCTIONS - MODE TOTAL

MH 1966 (Rev. 7/05)

PAGE 1 OF 1

FISCAL YEAR 2004 - 2005

County: CONTRA COSTA COUNTY
County Code: 07

County Code: 07			CR	CR	CR	CR	CAW		
Legal Entity: CONTRA COSTA COUNTY			A	B	C	D	E	F	G
Legal Entity Number: 00007			Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
Mode: 15 - Outpatient Services (Program 1)				01	10	60	70	10	
1	Allocation Percentage		100.00%	9.44%	41.24%	42.61%	6.23%	0.48%	
2	Total Units			1,337,684	4,535,507	2,315,041	457,632	358,709	
3	Gross Cost		29,705,692	2,803,642	12,252,093	12,658,529	1,850,089	141,340	
4	Cost per Unit			2.10	2.70	5.47	4.04	0.39	
5	SMA per Unit			1.89	2.44	4.51	3.63	2.44	
6	Published Charge per Unit			2.25	2.90	5.87	4.34	2.90	
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/04 - 09/30/04		179,152	808,278	325,323	65,514		
8A		10/01/04 - 06/30/05		570,210	2,679,507	1,077,774	159,399		
9	Medicare/Medi-Cal Crossover Units	07/01/04 - 09/30/04			1,862	3,870	1,425		
9A		10/01/04 - 06/30/05			3,500	19,050	5,445		
10	Enhanced SD/MC (Children) Units	07/01/04 - 09/30/04		840	6,033	1,045	90		
10A		10/01/04 - 06/30/05		535	18,459	3,915	150		
10B	Enhanced SD/MC (Refugees) Units	07/01/04 - 06/30/05							
11		10/01/04 - 09/30/04		715	8,628	540	105		
11A	Healthy Families (SED) Units	07/01/04 - 09/30/04							
12		10/01/04 - 06/30/05		1,570	34,276	4,577	795		
12	Non-Medi-Cal Units			584,662	974,964	878,947	224,709	358,709	
13	Medi-Cal Costs	07/01/04 - 09/30/04	4,602,649	375,483	2,183,460	1,778,850	264,856		
13A		10/01/04 - 06/30/05	14,971,068	1,195,099	7,238,346	5,893,214	644,409		
14	Medi-Cal SMA Upper Limits	07/01/04 - 09/30/04	4,015,818	338,597	1,972,198	1,467,207	237,816		
14A		10/01/04 - 06/30/05	13,055,073	1,077,697	6,537,997	4,860,761	578,618		
15	Medi-Cal Published Charges	07/01/04 - 09/30/04	4,941,075	403,092	2,344,006	1,909,646	284,331		
15A		10/01/04 - 06/30/05	16,071,868	1,282,973	7,770,570	6,326,533	691,792		
16	Medi-Cal Negotiated Rates	07/01/04 - 09/30/04							
16A		10/01/04 - 06/30/05							
17	Medicare/Medi-Cal Crossover Costs	07/01/04 - 09/30/04	31,952		5,030	21,161	5,761		
17A		10/01/04 - 06/30/05	135,632		9,455	104,164	22,013		
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/04 - 09/30/04	27,170		4,543	17,454	5,173		
18A		10/01/04 - 06/30/05	114,221		8,540	85,916	19,765		
19	Medicare/Medi-Cal Crossover Published Charges	07/01/04 - 09/30/04	34,301		5,400	22,717	6,185		
19A		10/01/04 - 06/30/05	145,605		10,150	111,824	23,631		
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/04 - 09/30/04							
20A		10/01/04 - 06/30/05							
21	Enhanced SD/MC Costs	07/01/04 - 09/30/04	24,136	1,761	16,297	5,714	364		
21A		10/01/04 - 06/30/05	72,999	1,121	49,865	21,407	606		
22	Enhanced SD/MC SMA Upper Limits	07/01/04 - 09/30/04	21,348	1,588	14,721	4,713	327		
22A		10/01/04 - 06/30/05	64,252	1,011	45,040	17,657	545		
23	Enhanced SD/MC Published Charges	07/01/04 - 09/30/04	25,910	1,890	17,496	6,134	391		
23A		10/01/04 - 06/30/05	78,367	1,204	53,531	22,981	651		
24	Enhanced SD/MC Negotiated Rates	07/01/04 - 09/30/04							
24A		10/01/04 - 06/30/05							
25	Enhanced SD/MC (Refugees) Costs								
26	Enhanced SD/MC (Refugees) SMA Upper Limits								
27	Enhanced SD/MC (Refugees) Published Charges								
28	Enhanced SD/MC (Refugees) Negotiated Rates								
29	Healthy Families Costs	07/01/04 - 09/30/04	28,183	1,499	23,307	2,953	424		
29A		10/01/04 - 06/30/05	124,124	3,291	92,592	25,027	3,214		
30	Healthy Families SMA Upper Limits	07/01/04 - 09/30/04	25,220	1,351	21,052	2,435	381		
30A		10/01/04 - 06/30/05	110,129	2,967	83,633	20,642	2,886		
31	Healthy Families Published Charges	07/01/04 - 09/30/04	30,255	1,609	25,021	3,170	456		
31A		10/01/04 - 06/30/05	133,250	3,533	99,400	26,867	3,450		
32	Healthy Families Negotiated Rates	07/01/04 - 09/30/04							
32A		10/01/04 - 06/30/05							
33	Non-Medi-Cal Costs		9,714,949	1,225,389	2,633,741	4,806,038	908,441	141,340	

DETAIL COST REPORT

ALLOCATION OF COSTS TO SERVICE
FUNCTIONS - MODE TOTAL

MH 1966 (Rev. 7/05)

PAGE 1 OF 1

FISCAL YEAR 2004 - 2005

County: CONTRA COSTA COUNTY
County Code: 07

Legal Entity: CONTRA COSTA COUNTY		A	CR B	CR C	D	E	F	G
Legal Entity Number: 00007			Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
Mode: 45 - Outreach Services		Mode Total	10	20				
1	Allocation Percentage	100.00%	35.24%	64.76%				
2	Total Units		171,000	309,240				
3	Gross Cost	1,357,952	478,586	879,366				
4	Cost per Unit		2.80	2.84				
5	Non-Medi-Cal Units		171,000	309,240				
6	Non-Medi-Cal Costs	1,357,952	478,586	879,366				

DETAIL COST REPORT

ALLOCATION OF COSTS TO SERVICE
FUNCTIONS - MODE TOTAL

MH 1966 (Rev. 7/05)

PAGE 1 OF 1

FISCAL YEAR 2004 - 2005

County: CONTRA COSTA COUNTY
County Code: 07

		MAA	MAA	MAA			
Legal Entity: CONTRA COSTA COUNTY		A	B	C	D	E	G
Legal Entity Number: 00007			Service	Service	Service	Service	Service
Mode: 55 - Medi-Cal Administrative Activities		Mode Total	Function	Function	Function	Function	Function
			01	14	24		
1	Allocation Percentage	100.00%	14.95%	42.65%	42.40%		
2	Total Units		232,281	614,134	380,498		
3	Total Expenditures	1,104,727	165,124	471,153	468,450		
4	Cost per Unit		0.71	0.77	1.23		
5	Non-Medi-Cal Costs	361,818					

DETAIL COST REPORT

DETERMINATION OF SD/MC DIRECT SERVICES AND MAA REIMBURSEMENT

MH 1968 (Rev. 7/05)

FISCAL YEAR 2004 - 2005

County: CONTRA COSTA COUNTY County Code: 07			REIMBURSEMENT TYPE				SMA	SMA			Costs		
Legal Entity: CONTRA COSTA COUNTY Legal Entity Number: 00007			A	B	C	D	E	F	G	H	I	J	K
			Mode 55			Total MAA	Total Inpatient Mode 05 Hospital Inpatient Services	Mode 05 Other 24 Hour Services	Mode 10 Day Services	Mode 15 Outpatient Services Program (1)	Total Outpatient Excluda Program (2)	Mode 15 Outpatient Services Program (2)	Total Outpatient (Col 1 + Col J)
			S.F.'s 01-09	S.F.'s 11-19, 31-39	S.F.'s 21-29								
1	Medi-Cal Costs	07/01/04 - 09/30/04					1,149,524		606,395	4,602,649	5,209,044		5,209,044
1A		10/01/04 - 06/30/05					6,352,824		1,853,896	14,971,068	16,824,964		16,824,964
2	Medi-Cal SMA	07/01/04 - 09/30/04					764,471		770,380	4,015,818	4,786,199		4,786,199
2A		10/01/04 - 06/30/05					4,192,161		2,355,231	13,055,073	15,410,304		15,410,304
3	Medi-Cal P. C.	07/01/04 - 09/30/04					1,604,800		919,772	4,941,075	5,860,847		5,860,847
3A		10/01/04 - 06/30/05					8,868,900		2,811,966	16,071,868	18,883,834		18,883,834
4	Medi-Cal N. R.	07/01/04 - 09/30/04											
4A		10/01/04 - 06/30/05											
5	Medi-Cal Gross Reimbursement	07/01/04 - 09/30/04					764,471		770,380	4,015,818	4,786,199		4,786,199
5A		10/01/04 - 06/30/05					4,192,161		2,355,231	13,055,073	15,410,304		15,410,304
6	Medicare/Medi-Cal Crossover Cost	07/01/04 - 09/30/04					647,825		14,129	31,952	46,081		46,081
6A		10/01/04 - 06/30/05					2,187,018		33,478	135,632	169,110		169,110
7	Medicare/Medi-Cal Crossover SMA	07/01/04 - 09/30/04					486,025		17,949	27,170	45,119		45,119
7A		10/01/04 - 06/30/05					1,640,790		42,530	114,221	156,751		156,751
8	Medicare/Medi-Cal Crossover P. C.	07/01/04 - 09/30/04					904,400		21,431	34,301	55,732		55,732
8A		10/01/04 - 06/30/05					3,053,200		50,779	145,605	196,384		196,384
9	Medicare/Medi-Cal Crossover N. R.	07/01/04 - 09/30/04											
9A		10/01/04 - 06/30/05											
10	Medicare/Medi-Cal Crossover Gross Reim.	07/01/04 - 09/30/04					486,025		17,949	27,170	45,119		45,119
10A		10/01/04 - 06/30/05					1,640,790		42,530	114,221	156,751		156,751
11	Total SD/MC + Crossover Gross Reim.	07/01/04 - 09/30/04					1,250,496		788,330	4,042,988	4,831,317		4,831,317
11A		10/01/04 - 06/30/05					5,832,951		2,397,761	13,169,294	15,567,055		15,567,055
12	Enhanced SD/MC (Children) Cost	07/01/04 - 09/30/04							51,113	24,136	75,249		75,249
12A		10/01/04 - 06/30/05							61,396	72,999	134,395		134,395
13	Enhanced SD/MC (Children) SMA	07/01/04 - 09/30/04							64,940	21,348	86,288		86,288
13A		10/01/04 - 06/30/05							78,004	64,252	142,256		142,256
14	Enhanced SD/MC (Children) P. C.	07/01/04 - 09/30/04							77,528	25,910	103,439		103,439
14A		10/01/04 - 06/30/05							93,124	78,367	171,491		171,491
15	Enhanced SD/MC (Children) N. R.	07/01/04 - 09/30/04											
15A		10/01/04 - 06/30/05											
16	Enhanced SD/MC (Children) Gross Reim.	07/01/04 - 09/30/04							64,940	21,348	86,288		86,288
16A		10/01/04 - 06/30/05							78,004	64,252	142,256		142,256
17	Enhanced SD/MC (Refugees) Cost	07/01/04 - 06/30/05											
18	Enhanced SD/MC (Refugees) SMA	07/01/04 - 06/30/05											
19	Enhanced SD/MC (Refugees) P. C.	07/01/04 - 06/30/05											
20	Enhanced SD/MC (Refugees) N. R.	07/01/04 - 06/30/05											
21	Total Medi-Cal Gross Reimbursement	07/01/04 - 09/30/04					1,250,496		853,270	4,064,336	4,917,605		4,917,605
21A	(Excludes Refugees)	10/01/04 - 06/30/05					5,832,951		2,475,765	13,233,546	15,709,311		15,709,311
22	Enhanced SD/MC (Refugees) Gross Reim.	07/01/04 - 06/30/05											
23	Healthy Families Cost	07/01/04 - 09/30/04								28,183	28,183		28,183
23A		10/01/04 - 06/30/05								124,124	124,124		124,124
24	Healthy Families SMA	07/01/04 - 09/30/04								25,220	25,220		25,220
24A		10/01/04 - 06/30/05								110,129	110,129		110,129
25	Healthy Families P. C.	07/01/04 - 09/30/04								30,255	30,255		30,255
25A		10/01/04 - 06/30/05								133,250	133,250		133,250
26	Healthy Families N. R.	07/01/04 - 09/30/04											
26A		10/01/04 - 06/30/05											
27	Healthy Families Gross Reim.	07/01/04 - 09/30/04								25,220	25,220		25,220
27A		10/01/04 - 06/30/05								110,129	110,129		110,129
28	Less: Patient and Other Payor Revenue												
28A	SD/MC + Crossover Revenue	07/01/04 - 09/30/04					527,039		12,625	11,513	24,138		24,138
28A		10/01/04 - 06/30/05					1,814,998		27,991	59,843	87,834		87,834
29	Enhanced SD/MC (Children) Revenue												
30	Enhanced SD/MC (Refugees) Revenue												
31	Healthy Families Revenue												
32	Total Expenditures from MAA (Mode 55)		165,124	471,153	468,450	1,104,727							
33	Medi-Cal Eligibility Factor (Average)			61.49%									
34	Revenue - MAA												
35	Net Due - SD/MC for Direct Services	07/01/04 - 09/30/04	165,124	289,724	288,062	742,909	723,457		840,645	4,052,823	4,893,467		4,893,467
35A		10/01/04 - 06/30/05					4,017,953		2,447,774	13,173,703	15,621,477		15,621,477
36	Net Due - Enhanced SD/MC (Refugees)												
37	Net Due - Healthy Families	07/01/04 - 09/30/04								25,220	25,220		25,220
37A		10/01/04 - 06/30/05								110,129	110,129		110,129
38	Amount Negotiated Rates Exceed Costs												
38A	SD/MC (Includes Children)	07/01/04 - 09/30/04											
39	Enhanced SD/MC (Refugees)	10/01/04 - 06/30/05											
40	Healthy Families	07/01/04 - 09/30/04											
40A		10/01/04 - 06/30/05											

State of California Health and Human Services Agency

DETAIL COST REPORT

SD/MC PRELIMINARY DESK SETTLEMENT

MH 1979 (Rev. 7/05)

County: CONTRA COSTA COUNTY

County Code: 07

Legal Entity: CONTRA COSTA COUNTY		A	B	C	D	E	F	G	H	I	J
Legal Entity Number: 00007		Total MAA	Total Inpatient	Total Outpatient	Total	50.00% FFP	50.00% FFP	50.00% FFP	Variable % FFP	75.00% FFP	Total FFP
SD/MC Administrative Reimbursement (County Only)											
1	County SD/MC Direct Service Gross Reimbursement		7,083,447	20,626,916	27,710,363						
2	Contract Providers Medi-Cal Direct Service Gross Reimbursement		1,899,316	19,505,577	21,404,893						
3	Total Medi-Cal Direct Service Gross Reimbursement				49,115,256						
4	Medi-Cal Administrative Reimbursement Limit				7,367,288						
5	Medi-Cal Administration				6,735,478						
6	Medi-Cal Administrative Reimbursement				6,735,478	3,367,739					3,367,739
Healthy Families Administrative Reimbursement (County Only)											
7	County Healthy Families Direct Service Gross Reimbursement			135,349	135,349						
7A	Contract Providers Healthy Families Direct Service Gross Reim.			164,007	164,007						
7B	Total Healthy Families Direct Service Gross Reimbursement				299,356						
8	Healthy Families Administrative Reimbursement Limit				29,936						
9	Healthy Families Administration				31,280						
10	Healthy Families Administrative Reimbursement				29,936				19,458		19,458
SD/MC Net Reimbursement for MAA											
11	Medi-Cal Admin. Activities Svc Functions 01 - 09	165,124			165,124	82,562					82,562
12	Medi-Cal Admin. Activities Svc Functions 11 - 19, 31 - 39	289,724			289,724	144,862					144,862
13	Medi-Cal Admin. Activities Svc Functions 21 - 29 (County Only)	288,062			288,062					216,046	216,046
14	Utilization Review-Skilled Prof. Med. Personnel (County Only)				705,433					529,075	529,075
15	Other SD/MC Utilization Review (County Only)				596,191	298,096					298,096
16	SD/MC Net Reimbursement for Direct Services		723,457	4,807,179	5,530,637		2,765,318				2,765,318
16A			4,017,953	15,479,221	19,497,173			9,748,587			9,748,587
17	Enhanced SD/MC Net Reimb. (Children)			86,288	86,288				56,087		56,087
17A				142,256	142,256				92,467		92,467
18	Enhanced SD/MC Net Reimb. (Refugees)										
19	Total SD/MC Reimbursement Before Excess FFP										17,300,838
20	Amount Negotiated Rates Exceed Costs - SD/MC & Enh. SD/MC										
21	Total SD/MC Reimbursement (FFP)										17,300,838
22	Contract Limitation Adjustment										
23	Adjusted Total SD/MC Reimbursement (FFP)										17,300,838
24	Healthy Families Net Reimbursement			25,220	25,220				16,393		16,393
24A				110,129	110,129				71,584		71,584
25	Total Healthy Families Reimbursement Before Excess FFP										107,435
26	Amount Negotiated Rates Exceed Costs - Healthy Families										
27	Total Healthy Families Reimbursement										107,435

DETAIL COST REPORT

CALCULATION OF SHORT-DOYLE/MEDI-CAL FOR FY 2004 - 2005 HOSPITAL ADMINISTRATIVE DAYS

MH 1991 (Rev. 7/05)

FISCAL YEAR 2004 - 2005

COUNTY NAME: CONTRA COSTA COUNTY		LEGAL ENTITY			NAME: CONTRA COSTA COUNTY			
COUNTY CODE: 07					NUMBER: 00007			
A	B	C	D	E	F	G	H	I
Settlement Group	PROVIDER NUMBER	SMA RATE	PERIOD OF SERVICE	ADMIN DAYS	SUBTOTAL AMOUNT	PHYSICIAN COSTS	ANCILLARY COSTS	TOTAL AMOUNT
SD/MC		\$236.82	07/01/04 - 07/31/04					
		\$236.82	08/01/04 - 09/30/04	193	\$ 45,706		\$32,667	\$78,373
		\$236.82	10/01/04 - 12/31/04	1,131	\$ 267,843		\$191,430	\$459,273
		\$236.82	01/01/05 - 06/30/05					
							Sub Total	\$ 537,646
Children EMC		\$236.82	07/01/04 - 07/31/04					
		\$236.82	08/01/04 - 09/30/04					
		\$236.82	10/01/04 - 12/31/04					
		\$236.82	01/01/05 - 06/30/05					
							Sub Total	
Refugees EMC		\$236.82	07/01/04 - 07/31/04					
		\$236.82	08/01/04 - 09/30/04					
		\$236.82	10/01/04 - 12/31/04					
		\$236.82	01/01/05 - 06/30/05					
							Sub Total	
Healthy Families		\$236.82	07/01/04 - 07/31/04					
		\$236.82	08/01/04 - 09/30/04					
		\$236.82	10/01/04 - 12/31/04					
		\$236.82	01/01/05 - 06/30/05					
							Sub Total	
GRAND TOTAL					\$ 313,550		\$ 224,096	\$ 537,646